St. Martha Catholic Church
Electronic Funds Transfer Authorization Agreement

STEWARDSHIP FORM

Steps to voluntarily sign up for electronic funds transfer (EFT)

1. Indicate whether your payment will be withdrawn from your checking or savings account
2. Indicate the effective date, amount and frequency of your payment
3. Attach a voided check (checking account) or a voided deposit slip (savings account) for verification of all financial institution information
4. Sign the form
5. Return to: St. Martha Parish Office
   2825 Klondike Lane
   Louisville, KY 40218

I (we) hereby authorize St. Martha Church to initiate the following debit entries and to initiate, if necessary, credit entries and adjustments for any debit entries in error to my (our) account.

Select one: ☐ **Checking Account** ☐ **Savings Account**

Date of first withdrawal _____ **allow 2 weeks for processing**

Check one:

☐ **Deduct stewardship in the amount of $**_____ **Semi-monthly on the 1st & 15th of the month**

☐ **Deduct stewardship in the amount of $**_____ **Monthly on the 1st of the month**

☐ **Deduct stewardship in the amount of $**_____ **Monthly on the 15th of the month**

☐ **I am currently enrolled in EFT for Stewardship. Replace my previous commitment with this form.**

☐ **I am not currently enrolled in EFT for Stewardship.**

This authority is to remain in full force and effect until St. Martha Church receives written notification from me (us) of its termination in such time and in such manner as to afford St. Martha Church and your financial institution a reasonable opportunity to act on it.

Names: _____ Envelope # _____

Date: _____ **Signed X** _____

Signed X _____

ATTACH VOIDED CHECK (Checking) OR DEPOSIT SLIP (Savings) HERE