

ELECTRONIC GIVING AUTHORIZATION FORM

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To have St. Victoria set up your electronic contributions, please fill out and return this form. If you prefer to manage your contributions online yourself, please visit www.stvictoria.org/give					
Today's Date: // Envelope # (if known) Type of authorization: New authorization Change donation amount Change donation date Discontinue electronic donation Discontinue electronic donation Discontinue electronic donation					
Last Name			First Name	First Name	
Address					
City			State	Zip	
Email					
FIRST DONATION DATE: / (mm/dd/yy)		 FREQUENCY OF DONATION Weekly on Monday Monthly on the 1st Monthly on the 15th Once per year One Time 	that goes toward the Church Improven major projects and ir (previously known as Fi		
CHECKING / SAVINGS	 Please debit payments from my (check one): Savings Account (contact your financial institution for Routing #) Checking Account (complete routing number & account →) 		Valid Routing # mu Account Number: 1:1234557891: 123 123	Routing Number: Valid Routing # must start with 0, 1, 2, or 3 Account Number: I:123455789I: 123 123455II OOD 1 Check Number Routing Number	
	I authorize St. Victoria to process debit entries to my account. I understand that this authority will remain in effect until I provide reasonable notification to terminate the authorization. Authorized Signature: Date:				
CREDIT / DEBIT CARD	Please charge my donation to (check one): Visa Visa American Express Discover Card				
	Card Number:		Expiration	Date:	
	Optional: Give an additional 2.75% to help offset the credit card processing fee				
	Name on Card: Billing Address (if different from above):				
	I authorize St. Victoria to process transactions in accordance with the information above. Signature (as it appears on the card): Date:				

Thank you for your continued support to St. Victoria Parish Family!