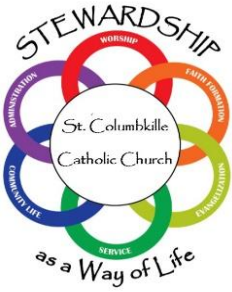


## AUTHORIZATION FOR ELECTRONIC FUNDS TRANSFER

Return to St. Columbkille Catholic Church, 1240 Rush St., Dubuque, IA. 52003-7556



I/we hereby authorize St. Columbkille Catholic Church to initiate debit entries to my/our checking or savings account as indicated below, and my/our financial institution named below to debit same to such account.

\*Attach your voided check or savings account slip.

**BANK NAME** \_\_\_\_\_

**ACCOUNT #** \_\_\_\_\_

\$  on the 5th day of each month (If the 5th is on a weekend, this might be taken out on Friday or Monday)  
(This authority will commence in 2017 and will remain in effect until you notify St. Columbkille to change or cancel it.)

**SIGNATURE X** \_\_\_\_\_

**DATE** \_\_\_\_\_

**Return to the parish office  
1240 Rush St.  
Dubuque, IA. 52003-7556  
563-583-9117**