

Our Lady of Peace Parish

130 Exchange St.
Geneva, NY 14456

**Tired of writing checks?
Tired of keeping track of your envelopes?
Simplify your life by signing up for Electronic Funds Transfer!**

Automatic Donation Agreement

Last Name: _____ First Name: _____

Address: _____ Phone: _____

City: _____ State: _____ Zip: _____

I would like my donation to be made:

- Weekly - Friday each Week
- Monthly - Last business day before the 15th
- Monthly - Last business day of the month

Donation Amount:
Offertory Collection \$ _____

Second Collections \$ _____



I/ We hereby authorize Our Lady of Peace Parish to initiate debit entries to my (our) account as described on this form. Such debits are to be made for the benefit of Our Lady of Peace Parish. My/Our account will remain subject to its individual term and conditions, which are not modified by this transaction. I/We acknowledge that the origination of these transactions must comply with the provisions of U.S law.

I/ We understand that this authorization will remain in effect until Our Lady of Peace Parish has received written notification from me (or either of us) at least 10 days prior to its terminations in such time and in such manner as to afford Our Lady of Peace Parish and Five Star Bank a reasonable opportunity to act on it.

Signature _____ Date _____

Signature _____ Date _____

You must attach a cancelled or voided check!