

ACH Withdrawal Form

Name: _____

Begin an electronic contribution to Saint Anne in the total amount of \$ _____

Beginning on _____ (month) _____ (year)

\$ _____ withdrawn on the 5th of the month

\$ _____ withdrawn on the 20th of the month

Please provide:

Bank Name: _____

Type of account Checking Savings

Bank Routing Number: _____

Account Number: _____

Include a voided check with this form.

I hereby authorize St. Anne Congregation to directly charge the account listed above for my financial giving to St. Anne. This authorization will remain in effect until I direct you in writing to change it or revoke it.

Signature: _____

Date: _____

Please bring the form along with a voided check to the church office or mail it along with a voided check to:

**St. Anne Catholic Church
9091 Prairie Ridge Blvd.
Pleasant Prairie WI 53158**