

# Our Lady of Fatima Chapel, McGrath

299 Red Oak DR • Aitkin MN 56431

The convenience of an **Automatic Direct Giving Plan** is now being expanded to add the options of weekly and bi-monthly to the existing monthly donation option.

You can have your donation made automatically from your checking or savings account. Plus...you won't have to change your present banking relationship to take advantage of this service.

### *The Automatic Direct Giving Plan will help you in several ways!*

- *Make donating convenient and timely, even when you're out of town.*
- *Save time with fewer checks to write.*
- *Helps you meet commitments in a convenient and timely manner.*

### How to Get Started

To set up automatic direct giving, simply complete the authorization form below and return it to the parish office. Donations can be debited automatically from checking or savings accounts.

**PLEASE NOTE:** Direct Giving for Our Lady of Fatima Chapel will be processed along with the St. James batch. These donations will then transferred to Our Lady of Fatima. If you have any questions or concerns about automatic direct giving, please call the Parish office at 218-927-6581.

AUTHORIZATION FORM Our Lady of Fatima Chapel, McGrath Automatic Direct Giving	
Name: _____	I/we would like to begin giving in <u>the frequency noted on the left</u> on:
Address: _____	
City, State, Zip: _____	(Days of the month that can be selected for direct giving are the 4th, 11th, 18th and 25th.)
Phone: _____	Date: _____
Email address: _____	Please debit my (check one)
Envelope Number: _____ (office use)	___ Checking account (attach voided check)
I would like to make the following contributions:	# _____
<b>Circle one: Monthly    Bi-monthly    Weekly</b>	___ Savings account
___ Regular (general operating) \$ _____	(attach voided deposit slip)
___ United Catholic Appeal \$ _____	# _____
___ Food Shelf (McGregor) \$ _____	I authorize St. James Church to make deductions from my checking/savings account as noted above. This authority will remain in effect until I notify St. James in writing to change or cancel this authorization.
___ Other \$ _____	<b>AUTHORIZED SIGNATURE:</b> _____ Date: ____/____/____
___ Other _____ \$ _____	
<b>Total</b> \$ _____	