Frequently Asked Questions About Electronic Funds Transfer (EFT)

- **What is EFT?**
  Electronic Funds Transfer is an automatic debit program which enables you to make your regular offertory contributions to Saint Margaret, directly from your bank, without writing checks.
- **How can money be transferred from my account?**
  Only you can authorize EFT. Your written authorization is required.
- **When is the EFT transferred from my account?**
  Two Options are available. Once a month on the 1st or 15th of each month or twice a month on the 1st and 15th of each month.
- **How do I sign up for EFT?**
  Complete and sign the authorization form below and return it, along with a voided check or savings deposit slip to Saint Margaret Parish Office, 141 N. Hickory Avenue, Bel Air, Maryland 21014.

Saint Margaret Parish

Yes! I'd like to sign up for Electronic Funds Transfer

Authorization Agreement For Direct Payments (ACH Debits)

I (we) hereby authorize SAINT MARGARET PARISH, hereinafter called COMPANY, to initiate debit entries to my (our) ❑ Checking Account (please attach a voided check)
or to my (our) ❑ Savings Account (please attach a savings deposit slip)
at the depository financial institution named below, hereinafter called DEPOSITORY.
I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of the U.S. law.

Preferred Payment Options: $_____ ___ Once a month on the 1st day of the month, OR

$_____ ___ Once a month on the 15th day of the month, OR

$_____ ___ Twice a month on the 1st and 15th day of the month

Depository Name _____
City _____ State _____

This authorization is to remain in full force and effect until COMPANY has received written notification from me (or ether of us) of its termination in such time and in such manner as to afford COMPANY and DEPOSITORY a reasonable opportunity to act on it. I understand that my financial institution may charge my account a $ fee for any insufficient funds (NSF) transactions.

Name(s) _____ ID (Envelope) Number _____

Date _____ Authorized Signature _____

NOTE: ALL WRITTEN DEBIT AUTHORIZATIONS MUST PROVIDE THAT THE RECEIVER MAY REVOKE THE AUTHORIZATION ONLY BY NOTIFYING THE ORIGINATOR IN THE MANNER SPECIFIED IN THE AUTHORIZATION.

Effective Date: _____