St. Lamberts is offering a convenient service to our parishioners – T*he Direct Payment Plan*.
Now you can have your weekly contribution payments automatically taken out of your checking or savings account. The Direct Payment Plan will help you in several ways:

- ✓ It saves time – fewer checks to write
- ✓ Helps meet your commitment in a convenient timely manner – even if your out of town or on vacation
- ✓ You can check a box on your envelope that says "I give electronically" to allow you to participate in the collection
- ✓ It's easy to sign up for and easy to cancel

Here's how the Direct Payment Plan works:
You authorize regular scheduled payments to be made from your checking or savings account. Your payments will be made automatically on the specified day, and proof of payment will appear on your statement.

The authority you give to charge your account will remain in effect until you notify us in writing to terminate the authorization. You may also change the amount you give by notifying us in writing at least 5 days prior to withdrawal date.

Withdrawals will be made on the 5th, 10th, 20th and 25th of each month. You may choose to withdraw on each date, or if you prefer, just one date per month. If the date falls on a weekend or holiday, it will be withdrawn on the next bank work day.

To take advantage of this service, please complete the attached authorization form and return it to us.
Please write legibly and we will provide you a copy for your records once setup is complete, if requested.

AUTHORIZATION FOR DIRECT PAYMENT

I authorize St. Lambert Parish to initiate entries to my checking/savings account. This authority will remain in effect until I notify you in writing to cancel or change it at least 5 days prior to withdrawal. I can stop payment of any entry by notifying my financial institution 3 days before my account is charged.

Name of Financial Institution _____

City _____ State _____ Zip _____

Signature _____ Date _____

Name (please print) _____

Address (please print) _____

Routing No. _____Account No._____
Between these symbols ⑆ ⑆ second set of numbers

You must attach a *voided check* for withdrawal from your *checking account* OR a *deposit slip* for withdrawal from your *savings account*.

Please check one: Checking _____Savings _____

Please check one: New_____ Change _____ Stop _____

Please indicate the **dollar amount** to be withdrawn on the desired date:

Weekly envelopes	Weekly envelopes	Weekly envelopes	Weekly envelopes
5th _____	10th _____	20th _____	25th _____