

Christ the King Catholic Church

Electronic Contribution Form

ES _____

52473 Indiana State Road 933 South Bend, IN 46637
Phone 574-272-3113 Fax 574-273-6702

Contribution Information:

Church Offertory \$ _____
Weekly (Transferred on Mondays)Please circle one
Semimonthly (Transferred on 15th or 30th)

Monthly (Transferred on 15th or 30th)

Monthly Contributions

Capital Campaign Pledge \$ _____
Please circle one (Transferred on 15th or 30th)Parish Poor Envelope \$ _____
Please circle one (Transferred on 15th or 30th)

Holy Days & Annual Collections

Mary, Mother of God \$ _____
(Transferred January 1)Assumption of Mary \$ _____
(Transferred August 1)All Saint's Day \$ _____
(Transferred November 1)Immaculate Conception \$ _____
(Transferred December 1)

Christmas (Transferred December 1) \$ _____

Easter (Transferred April 1) \$ _____

National Collections (these are annual collections)

Church in Latin America *Transferred on January 30th* \$ _____Black & Indian Missions *Transferred on March 15th* \$ _____Catholic Relief Services *Transferred on March 15th* \$ _____Pontifical Collections for the Holy Land *Transferred on April 1st* \$ _____Catholic Home Missions Appeal *Transferred on April 30th* \$ _____Catholic Charities *Transferred on May & December 15th* \$ _____Pentecost Collection for Seminary Education
Transferred on June 15th \$ _____Peter's Pence (Collection for Holy Father) *Transferred on June 15th* \$ _____Catholic University of America *Transferred on August 30th* \$ _____Catholic Communications Campaign *Transferred on September 15th* \$ _____World Mission Sunday (Propagation of Faith)
Transferred on October 30th \$ _____Archdiocese for the Military Services (Every three years beginning in 2019)
Transferred on November 1st \$ _____Catholic Campaign for Human Development
Transferred on November 15th \$ _____Retirement Fund for Religious *Transferred on December 15th* \$ _____Rice Bowl Collection *Transferred on April 1st* \$ _____Church in Eastern & Central Europe *Transferred on March 1st* \$ _____

MEMBER AUTHORIZATION FORM

EFFECTIVE DATE: _____ New Authorization Change Contribution Date Change Financial Institution
 Change Contribution Amount Discontinue Electronic Giving

For Office Use Only Date: _____ Envelope # _____

Name of Member (Please print)

Address City State Zip code

 Checking Account (attach a voided check) Savings Account (attach a savings deposit slip)Routing # _____
Routing number must start with 0, 1, 2, or 3, is 9 digits long and is located at the bottom of check between these symbols : :

Account # _____

I authorize Christ the King Catholic Church and Vanco Services, LLC to process debit entries to my account. **I have attached a voided check or saving deposit slip.** This authority will remain in effect until I give reasonable notification to terminate this authorization.

Authorized signature on my account: _____ Date: _____

Do you want to continue to receive envelopes? _____ Would you like to receive Electronic Contributions Cards for weekly collection use? _____