



Heritage Bank of Schaumburg

**SUNDAY
COLLECTION**

ON BEHALF OF

CHURCH OF THE HOLY SPIRIT

HERITAGE BANK
SCHAUMBURG

AUTOMATED CHARGE AUTHORIZATION

1535 W Schaumburg Road
Schaumburg, IL 60194
tel 847 524 4000
fax 847 524 1974
hbschaumburg.com

I hereby authorize Heritage Bank of Schaumburg to debit the following account
in agreement to credit the Church of the Holy Spirit account.

Parishioner Account Information:

**PLEASE ATTACH A VOIDED CHECK OR COMPLETE THE FINANCIAL INSTITUTION
INFORMATION**

Financial Institution Name: _____

Financial Institution Routing #: _____

Financial Institution Telephone: _____

Name on Account: _____

Account Number: checking/savings _____

THE FOLLOWING MUST BE COMPLETED

Dollar Amount: _____

Date of Auto Debit: _____

Frequency of Auto Debit: _____ (weekly/biweekly/monthly)

*If the above information needs to be changed, parishioner must terminate this agreement and complete a new authorization form.

**This agreement will continue in effect until Heritage Bank of Schaumburg receives written
authorization to terminate the auto debit or the account closes.**

DATE: _____ **SIGNATURE:** _____

CHS ENVELOPE # _____ **PHONE #** _____

TERMINATION:

Please terminate the above auto debit authorization effective:

DATE: _____ **SIGNATURE:** _____