

Authorization for AUTOGIVING

Please fill out the form below, **attach a voided check and drop it in the collection basket, turn it into the parish office or mail to 110 St Elizabeth Drive, Chester Springs, PA 19425.**

Name: _____

Address: _____

Phone Number: _____

Email: _____

1. Please indicate amount & frequency of transfer for Sunday offering:

\$ _____ Weekly or

\$ _____ Beginning of the Month (debit of acct will occur on the Monday after the 1st Sunday on the month) or

\$ _____ The 15th of the Month

I hereby authorize Saint Elizabeth Parish to establish automatic withdrawals.

Signature _____ **Date** _____

Do you wish to include contributions to the diocesan collection to your monthly contribution?

\$ _____ **Additional withdrawal for the second collection.**
(See list of appeals on the reverse side.)

Special Collections in the Archdiocese of Philadelphia during 2024

January	Catholic Relief Service Collection
February	Care of the Aging & Infirm Priests of the Archdiocese Catholic Charities Appeal
March	Solidary Fund for the Church in Latin America Collection for the Church in Africa
April	Good Friday Collection for the Holy Land
May	Collection for the Catholic Home Missions
June	Peter's Pence Collection
July	Campaign for Human Development Collection
August	Mission Cooperative Collection Collection for Catholic University
September	Collection for the Church's Black & Indian Missions
October	Mission Sunday Collection
November	St. Charles Borromeo Seminary Appeal
December	Retirement Fund for Religious Collection