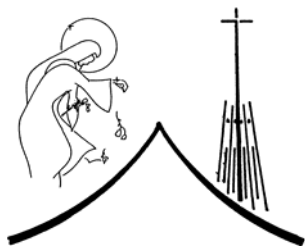


CHURCH OF THE  
LITTLE FLOWER



## E-Giving Paper Enrollment Form

800 Stevenson Drive · Springfield, Illinois 62703 · 217-529-1606

**Welcome to E-Giving at Little Flower!** Below, you can sign up for an electronic funds transfer (EFT) of your contributions (direct debit from checking or savings).

As a participant of the program, you are still free to make additional contributions by check or cash. Please continue to place an additional offering in the weekly collection basket for the various Diocesan collections.

A record of each contribution will appear on your monthly bank statement. In addition, we will continue to record and report to you all of your giving, regardless of the method, on the giving statements the church provides.

This page should only be used to initiate a new recurring contribution. Please do not use this form to update or cancel an existing recurring contribution. To make changes to an existing recurring contribution, contact Anita at 217-529-1606 or e-mail us at [accounts.lfc@comcast.net](mailto:accounts.lfc@comcast.net).

Please Print	For Church Office use: Church Envelope # _____
Name(s) _____	
Address _____	
City _____ State _____ Zip Code _____	
Telephone (Home) _____ (Business) _____	
Email _____	
\$ _____ Tithe(s) on the ___1 <sup>st</sup> ___5 <sup>th</sup> ___10 <sup>th</sup> ___15 <sup>th</sup> ___20 <sup>th</sup> ___25 <sup>th</sup> of the month <small>*You may choose multiple processing dates per month. Please note the total contribution amount specified will be debited on each date selected</small>	
\$ _____ Get Red Out on the ___1 <sup>st</sup> ___5 <sup>th</sup> ___10 <sup>th</sup> ___15 <sup>th</sup> ___20 <sup>th</sup> ___25 <sup>th</sup> of the month <small>*You may choose multiple processing dates per month. Please note the total contribution amount specified will be debited on each date selected.</small>	
<b>Enclosed is a voided check.</b> Please transfer my monthly contributions from my checking or savings account each month as specified above. I understand that my future monthly contributions will be transferred directly from my account and that I can increase, decrease, or suspend my contributions at any time by calling the Church Office at (217) 529-1606.	
Signature _____ Date _____ <small>(Required)</small>	
<i>All transfers originating as Automated Clearing House (ACH) transactions from checking or savings accounts will comply with U.S. law.</i>	

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ATTACH VOIDED CHECK  
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No goods or services have been provided in whole or partial consideration for the above contribution.  
Please make a copy of this form for your records or you may request a copy by contacting the Church Office at (217) 529-1606.