

PARISH PAYROLL

BANK ACCOUNT INFORMATION REQUEST FORM

Please designate the Parish bank account that is to be used for electronic withdrawal of funds necessary for payment of each Parish payroll.

Please attach a copy of a voided check.

Parish Name: _____

Bank Name: _____

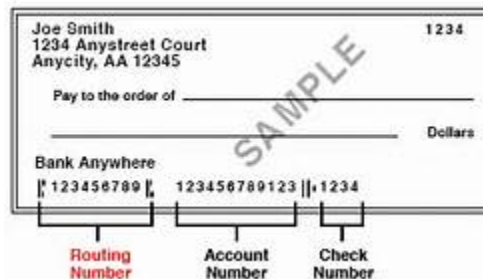
Bank Account Name: _____

Address/P.O. Box: _____

City, State & Zip Code: _____

Routing Number: _____

Account Number: _____



I understand that there will be an automatic withdrawal of funds from this account to cover the cost of each payroll for the above listed parish.

Signature of Pastor

Date