

AUTHORIZATION FORM FOR ELECTRONIC GIVING (from checking or savings account)

Wapping Community Church

UCC082235

FOR OFFICE USE ONLY	ENVELOPE/DONOR #	DATE
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Effective date of authorization: _____		
Type of Authorization Form:		
<input type="checkbox"/> New Authorization	<input type="checkbox"/> Change banking information	<input type="checkbox"/> Change donation amount
<input type="checkbox"/> Change donation date	<input type="checkbox"/> Discontinue electronic donation	
Last Name: _____	First Name: _____	
Address: _____		Telephone #: _____
City: _____	State: _____	Zip: _____
Please debit my donation from my: (check one)		Routing Number: _____
<input type="checkbox"/> Checking Account (attach a voided check below)		Valid Routing # must start with 0, 1, 2, or 3
<input type="checkbox"/> Savings Account (contact your financial institution for Routing #)		Account Number: _____
		<small> * 23456789 * 23 23456 * 000 * Routing Number Account Number Check Number </small>
DATE OF FIRST DONATION: ____/____/____	FREQUENCY OF DONATION: (check only one)	DESIGNATED AMOUNT:
	<input type="checkbox"/> Monthly on the 1 st	Per month contribution \$ _____
	<input type="checkbox"/> Monthly on the 15 th	x number of months _____
		Total \$ _____
AGREEMENT		
I authorize the above church and Vanco Services, LLC to process debit entries to my account. I understand that this authority will remain in effect until I provide reasonable notification to terminate the authorization.		
Authorized Signature: _____ Date: _____		

Please attach voided check here.

UNITED CHURCH
OF CHRIST

