



Authorization Form

Community United Methodist Church

11005500932

FOR OFFICE USE ONLY

ENVELOPE #

DATE

Type of Authorization Form:

<input type="checkbox"/> New authorization	<input type="checkbox"/> Change banking/credit card information
<input type="checkbox"/> Change donation amount	<input type="checkbox"/> Discontinue electronic donation
<input type="checkbox"/> Change donation date	

Last Name _____ First Name _____

Address _____

City _____ State _____ Zip _____

Email Address _____

Date of first donation: _____ / _____ / _____

Frequency of donation: (please check only one)

<input type="checkbox"/> Weekly – Mondays	<input type="checkbox"/> Church fund designations and amounts:
<input type="checkbox"/> Semi-Monthly 1 st and 15 th	<input type="checkbox"/> Operating \$ _____
<input type="checkbox"/> Monthly on the 1st	<input type="checkbox"/> Church Mortgage \$ _____
	<input type="checkbox"/> 2 nd Mile \$ _____
	<input type="checkbox"/> Special Appeals \$ _____

Special Instructions: _____

Total \$ _____

Annual contributions:

<input type="checkbox"/> Easter Offering	\$ _____	Transferred on April 1 st
<input type="checkbox"/> Thanksgiving	\$ _____	Transferred on November 15 th
<input type="checkbox"/> Christmas Offering	\$ _____	Transferred on December 15 th

CHECKING / SAVINGS

Please debit my donation from my (check one):

Savings Account (contact your financial institution for Routing #)

Checking Account (attach a voided check)

Routing Number: _____
Valid Routing # must start with 0, 1, 2, or 3

Account Number: _____

⑆ 23456789⑆ 123 4567 0001

Routing Number Account Number Check Number

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: _____

CREDIT CARD

Please charge my donation to my (check one): Visa MasterCard American Express Discover Card

Credit Card Number: _____ Expiration Date: _____

Name on Card: _____

Billing Address (if different from above): _____

I authorize the above church and Vanco Services, LLC to charge my credit card in accordance with the information above.

Signature (as it appears on the credit card): _____ Date: _____