

AUTHORIZATION AGREEMENT FOR AUTOMATIC WITHDRAWAL OF FUNDS

First United Methodist Church

32112186847

FOR OFFICE USE ONLY	DONOR#	DATE
Effective Date of Authorization: _____		
Type of Authorization:	<input type="checkbox"/> New Authorization	<input type="checkbox"/> Change Banking 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

Please debit my donation from my (check one): <input type="checkbox"/> Checking Account (attach a VOIDED check to bottom of the page) <input type="checkbox"/> Savings Account (contact your financial institution for routing #)	Routing # : _____ <i>Valid Routing # must start with 0, 1, 2, or 3</i> Account # : _____
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Date of First Donation ____/____/____	Frequency of donation: (Check one only) <input type="checkbox"/> Weekly - Mondays <input type="checkbox"/> Semi-Monthly - 1st and 15th <input type="checkbox"/> Monthly on the 1st <input type="checkbox"/> Monthly on the 15th
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Special Instructions: _____

Fund designation and amounts:		
<input type="checkbox"/>	Current Expenses	\$ _____
<input type="checkbox"/>	Benevolence	\$ _____
<input type="checkbox"/>	Repair & Maintenance (formerly Capital Funds)	\$ _____
<input type="checkbox"/>	Holy Ground Appeal	\$ _____
<input type="checkbox"/>	Capital Campaign- Phase I	\$ _____
	TOTAL	\$ _____

AGREEMENT

I authorize First UMC Hershey 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 _____

ATTACH VOIDED CHECK HERE