

# AUTHORIZATION FORM

Church of St. John in the Wilderness ES8936

<b>FOR OFFICE USE ONLY</b>	<b>ENVELOPE/DONOR #</b>	<b>DATE</b>
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Effective date of authorization: _____ Type of Authorization Form:	<input type="checkbox"/> New Authorization <input type="checkbox"/> Change donation amount <input type="checkbox"/> Change donation amount	<input type="checkbox"/> Change banking information <input type="checkbox"/> Discontinue electronic donation
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Last Name	First Name
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Address
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City	State	Zip
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Please debit my donation from my (check one): <input type="checkbox"/> Checking Account (attach a voided check below) <input type="checkbox"/> Savings Account (contact your financial institution for Routing #)	Routing Number: _____ <b>Valid Routing # must start with 0, 1, 2, or 3</b> Account Number: _____
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DATE OF FIRST DONATION: _____/_____/_____	FREQUENCY OF DONATION: (check only one) <input type="checkbox"/> Weekly — Mondays <input type="checkbox"/> Semi-Monthly — 1 <sup>st</sup> and 15 <sup>th</sup> <input type="checkbox"/> Monthly on the 1 <sup>st</sup> <input type="checkbox"/> Monthly on the 15 <sup>th</sup>	FUNDS AND AMOUNTS: <input type="checkbox"/> General Fund \$ _____
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<b>AGREEMENT</b> 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: _____
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