



**Court Street United  
Methodist Church**

### Authorization Form

16115584086

FOR OFFICE USE ONLY

ENVELOPE #

DATE

Type of Authorization Form:  New authorization  Change banking/credit card information  
 Change donation amount  Discontinue electronic donation  
 Change donation date

Last Name

First Name

Address

City

State

Zip

Date of first donation:

\_\_\_\_/\_\_\_\_/\_\_\_\_

Frequency of donation: (please check only one)

- Weekly on Mondays  
 Semi-Monthly – 1<sup>st</sup> and 15<sup>th</sup>  
 Monthly on the 1<sup>st</sup>  
 Monthly on the 15<sup>th</sup>

Designated amount:

Pledge \$ \_\_\_\_\_

Special Instructions:

Annual contributions:

- Easter Offering \$ \_\_\_\_\_ Transferred April 15<sup>th</sup>  
 Mother's Day \$ \_\_\_\_\_ Transferred May 1<sup>st</sup>  
 Thanksgiving \$ \_\_\_\_\_ Transferred November 15<sup>th</sup>  
 Christmas \$ \_\_\_\_\_ Transferred December 15<sup>th</sup>

CHECKING / SAVINGS

Please debit my donation from my (check one):

- Savings Account (contact your financial institution for Routing #)  
 Checking Account (attach a voided check below)

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

Account Number: \_\_\_\_\_

⑆ 2 3 4 5 6 7 8 9 0 ⑆ 2 3 4 5 6 7 8 9 0 0 0 1  
 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: \_\_\_\_\_

Please attach voided check here.