

AUTHORIZATION AGREEMENT FOR AUTOMATIC WITHDRAWAL OF FUNDS

First Presbyterian Church of Wheaton

ES7393

Envelope # (leave blank if not applicable)		
Last Name		First Name
Address		
City	State	Zip

Date of first contribution: _____ / _____ / _____	Frequency of contribution: (please check only one) <input type="checkbox"/> Monthly on the 1 st <input type="checkbox"/> Monthly on the 15 th	Contribution amount: \$ _____
Special Instructions: _____		

CHECKING / SAVINGS	Please debit my contribution from my (check one): <input type="checkbox"/> Savings Account (contact your financial institution for Routing #) <input type="checkbox"/> Checking Account (staple a voided check below)	Routing Number: _____ <i>Valid Routing # must start with 0, 1, 2, or 3</i> Account 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 contribution to my (check one): <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> 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: _____	

Please staple voided check over credit card section above if using checking account

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