## Trinity Presbyterian Church

## **ELECTRONIC GIVING AUTHORIZATION**

ES6160

			E50100
For Office Use Only   Envelope #			Date
Authorization Form			
Effective Date:	☐ Change Contribution Date		
□ New Authorization		☐ Change Financial Institution Account	
☐ Change Contribution Amount		☐ Discontinue Electronic Giving	
- Change Contribution Amount	□ Discon	unue Electronic Giving	
Name (Please Print)			
Address			
City	State		Zip
City	State	<u> </u>	Zip
GENERAL FUND \$	-	CAPITAL	CAMPAIGN \$
☐ Weekly (Transferred on Mondays)		☐ Weekly (Transferred on Mondays)	
☐ Semimonthly (Transferred on the 1 <sup>st</sup> & 15 <sup>th</sup> )		☐ Semimonthly (Transferred on the 1 <sup>st</sup> & 15 <sup>th</sup> )	
☐ Monthly (Transferred on either the 1 <sup>st</sup> or the 15 <sup>th</sup> )  CIRCLE ONE: 1 <sup>ST</sup> 15 <sup>TH</sup>		☐ Monthly (Transferred on either the 1 <sup>st</sup> or the 15 <sup>th</sup> )  CIRCLE ONE: 1 <sup>ST</sup> 15 <sup>TH</sup>	
Quarterly (The 1 <sup>st</sup> of the month beginning)		Quarterly (The 1 <sup>st</sup> of the month beginning)	
Please take my contribution directly from the account specified:			
☐ Checking Account (attach a voided check)		☐ Savings Account (attach a savings deposit slip)	
Routing #:  Routing number must start with 0, 1, 2, or 3, is 9 digits long, and is located at bottom of check between these symbols □:□:		Account #:	
I authorize <b>Trinity Presbyterian Church</b> and <b>Vanco Services</b> , <b>LLC</b> to process debit entries to my account. I have attached a voided check or savings deposit slip. This authority will remain in effect until I give reasonable notification to terminate this authorization.			
Authorized signature on my account:		Date:	
Please attach a voided check or savings deposit slip.			

PLEASE PLACE THE COMPLETED FORM IN A SEALED ENVELOPE MARKED "ELECTRONIC GIVING" AND PLACE IN THE STEWARDSHIP & FINANCE BOX IN THE CHURCH OFFICE.