

<b>For Office Use Only</b>	Envelope # _____	Date _____
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**Member Authorization Form**

Effective Date: \_\_\_\_\_

- New Authorization
- Change Contribution Amount

- Change Contribution Date
- Change Financial Institution Account
- Discontinue Electronic Giving

Name of Member (Please Print) \_\_\_\_\_

Address \_\_\_\_\_

City _____	State _____	Zip _____
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**Regular Contribution**

- Weekly (Transferred on Mondays)
- 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>
- Quarterly (The 1<sup>st</sup> of the month beginning \_\_\_\_\_)

Budget Fund                   \$ \_\_\_\_\_

For The Kingdom               \$ \_\_\_\_\_

Memorial                       \$ \_\_\_\_\_

Total Amount  
Per Contribution               \$ \_\_\_\_\_

**One Time Contributions**

Easter Offering                   \$ \_\_\_\_\_  
(Transferred April 1<sup>st</sup>)

Christmas Offering               \$ \_\_\_\_\_  
(Transferred December 15<sup>th</sup>)

Other                               \$ \_\_\_\_\_

Date of Transfer                   \_\_\_\_\_

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 Central United Methodist Church and Vanco Services, LLC 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.**