AUTHORIZATION AGREEMENT FOR AUTOMATIC WITHDRAWL OF FUNDS

Church Name: St. Williams Church; Atascadero, CA

Date: / /

Envelope #
(leave blank if not applicable)

Last Name: **First Name:**

Address **Telphone**

City **State** **Zip**

Date of First Distribution:

/ /

Special Instructions:

Frequency of Distribution:

- ☐ Weekly - Monday
- ☐ Semi-Monthly - 1st and 15th
- ☐ Monthly on the 1st
- ☐ Monthly on the 15th
- ☐ Quarterly on (1st of month beginning _____)
- ☐ One time only

Church fund designation and amounts:

☐ General Fund	$ _____
	$ _____
	$ _____
	$ _____
	$ _____
	$ _____
Total	$ _____

Annual Contributions:

- ☐ Easter offering: $ _____ Transferred on April 1st
- ☐ Christmas Offering: $ _____ Transferred on December 15th

CREDIT CARD

Please charge my contributions to my (check one): ☐ Visa ☐ Master Card ☐ American Express ☐ Discover Card

Credit Card # **Expiration Date:** / /

Name on card

Billing address:
(if different than above):

I authorize the above church and Vanco Services, LLC to charge my credit card in accordance with the information above

Signature _____ Date: _____ / _____ /

(as it appears on the credit card)

OR

CHECKING/SAVINGS

Please debit my contribution from my (check one):

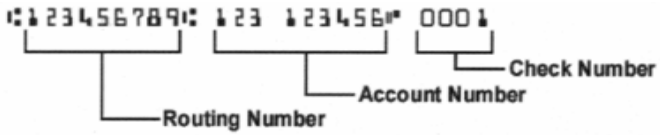
☐ Savings Account
(contact your financial institution for routing #)

☐ Checking Account
(Please staple a voided check to this form)

Routing Number: _____

Valid routing # must start with 0, 1, 2, or 3

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 authorization.

Authorized Signature: _____ Date: _____ / _____ /