

VANCO EFT AUTHORIZATION FORM



St. Mark's United Methodist Church
15019566657

FOR OFFICE USE ONLY	ENVELOPE/DONOR #	DATE																
Effective date of authorization: ____/____/____																		
Type of authorization: <input type="checkbox"/> New authorization <input type="checkbox"/> Change donation amount <input type="checkbox"/> Change donation date <input type="checkbox"/> Change banking information <input type="checkbox"/> Discontinue electronic donation																		
Last Name		First Name																
Address																		
City		State Zip																
Email Address																		
DATE OF FIRST DONATION: ____/____/____	FREQUENCY OF DONATION: <input type="checkbox"/> Weekly – Mondays <input type="checkbox"/> Semi-Monthly – 5 th and 20th <input type="checkbox"/> Monthly on the 5th	FUNDS: <table style="width:100%; border:none;"> <tr><td><input type="checkbox"/> General/Operating Budget</td><td>\$ _____</td></tr> <tr><td><input type="checkbox"/> Building/Property Maintenance</td><td>\$ _____</td></tr> <tr><td><input type="checkbox"/> Building Expansion</td><td>\$ _____</td></tr> <tr><td><input type="checkbox"/> Endowment Fund-General</td><td>\$ _____</td></tr> <tr><td><input type="checkbox"/> Endowment Fund-Missions</td><td>\$ _____</td></tr> <tr><td><input type="checkbox"/> African Ministry</td><td>\$ _____</td></tr> <tr><td><input type="checkbox"/> Children/Youth Outreach</td><td>\$ _____</td></tr> <tr><td colspan="2" style="text-align:right;">Total \$ _____</td></tr> </table>	<input type="checkbox"/> General/Operating Budget	\$ _____	<input type="checkbox"/> Building/Property Maintenance	\$ _____	<input type="checkbox"/> Building Expansion	\$ _____	<input type="checkbox"/> Endowment Fund-General	\$ _____	<input type="checkbox"/> Endowment Fund-Missions	\$ _____	<input type="checkbox"/> African Ministry	\$ _____	<input type="checkbox"/> Children/Youth Outreach	\$ _____	Total \$ _____	
<input type="checkbox"/> General/Operating Budget	\$ _____																	
<input type="checkbox"/> Building/Property Maintenance	\$ _____																	
<input type="checkbox"/> Building Expansion	\$ _____																	
<input type="checkbox"/> Endowment Fund-General	\$ _____																	
<input type="checkbox"/> Endowment Fund-Missions	\$ _____																	
<input type="checkbox"/> African Ministry	\$ _____																	
<input type="checkbox"/> Children/Youth Outreach	\$ _____																	
Total \$ _____																		
CHECKING / SAVINGS	Please debit my donation from my (check one): <input type="checkbox"/> Savings Account (contact your financial institution for Routing #) <input type="checkbox"/> Checking Account (attach a voided check below)	Routing Number: _____ Valid Routing # must start with 0, 1, 2, or 3 Account Number: _____ <div style="font-size: small; text-align: center;"> ⑆ 1 2 3 4 5 6 7 8 9 0 ⑆ 1 2 3 4 5 6 ⑆ 0 0 0 1 Routing Number Account Number Check Number </div>																
	I authorize the above organization 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 / DEBIT CARD	Card Brand (check one): <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> American Express <input type="checkbox"/> Discover Card																	
	Card Number:	Expiration Date:																
	Name on Card:																	
	Billing Address (if different from above):																	
	I authorize the above organization to process transactions in accordance with the information above. Signature (as it appears on the card): _____ Date: _____																	

If using a checking account, please attach a voided check over the credit/debit card section above.