

**CHRIST CONGREGATIONAL
CHURCH, UCC**

Authorization Form

UCC690240



FOR OFFICE USE ONLY

DONOR #

DATE

Effective date of authorization: _____

Type of Authorization Form: ☐ New authorization ☐ Change banking/credit card information
☐ Change donation amount ☐ Discontinue electronic donation
☐ Change donation date

Last Name

First Name

Address

City

State

Zip

Date of first donation:

____/____/____

Date of last donation (optional):

____/____/____

Frequency of donation: (please check only one)

- ☐ Weekly – Mondays
☐ Semi-Monthly – 1st and 15th
☐ Monthly on the 1st
☐ Monthly on the 15th

Church fund designations and amounts:

- ☐ General/Operating \$ _____
☐ Building Fund \$ _____
☐ Missions \$ _____

Total \$ _____

Special Instructions:

CREDIT CARD

Please charge my donation to my (check one): ☐ Visa ☐ MasterCard ☐ American Express ☐ 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 for StillspeakingMoney® in accordance with the information above.

Signature (as it appears on the credit card): _____ Date: _____

CHECKING / SAVINGS

Please debit my donation from my (check one):

- ☐ Savings Account (contact your financial institution for Routing #)
☐ Checking Account (attach a voided check)

Routing Number: _____
Valid Routing # must start with 0, 1, 2, or 3

Account Number: _____

⑆ 23456789 ⑆ 23 ⑆ 234567 ⑆ 000 ⑆
 Routing Number Account Number Check Number

I authorize the above church and Vanco Services, LLC to process debit entries to my account for StillspeakingMoney®. I understand that this authority will remain in effect until I provide reasonable notification to terminate the authorization.

Authorized Signature: _____ Date: _____

Please return this form to the church office for processing.