

Following God, loving others.

Authorization Agreement for Automatic Withdrawal of Funds

Name (please print) _						
Address		City				
State	Zip		Phone ()	
REGULAR CONTRIBUT	ΓΙΟΝS:					
Church Fund	<u>Dollar Amount</u>	<u>Frequency</u>		Start Date		
Mission Fund	\$	Monthly- 28 th of ea	ach month	//		
Checking Accoun	ributions from my (check t – attach voided check - contact your financial i	ŕ	riate routing	g number		
Routing Number Account Number			123456789): ing Number*	00123456789 III	1234	
I authorize Maurice Firs	t Reformed to process deb	it entries from my acco		tand that this auth	orization	
Signature				Date		