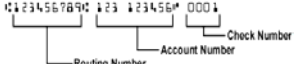


# AUTHORIZATION FORM

Buckingham Congregational Church

ES12829

FOR OFFICE USE ONLY	ENVELOPE/DONOR #	DATE
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Effective date of authorization: _____		
Type of Authorization Form:		
<input type="checkbox"/> New Authorization	<input type="checkbox"/> Change banking information	
<input type="checkbox"/> Change donation amount	<input type="checkbox"/> Discontinue electronic donation	
<input type="checkbox"/> Change donation date		
Last Name		First Name
Address		
City	State	Zip
Email Address		
Please debit my donation from my (check one):		Routing Number: _____
<input type="checkbox"/> Checking Account (attach a voided check below)		<b>Valid Routing # must start with 0, 1, 2, or 3</b>
<input type="checkbox"/> Savings Account (contact your financial institution for Routing #)		Account Number: _____
		
DATE OF FIRST DONATION:	FREQUENCY OF DONATION: (check only one)	FUNDS AND AMOUNTS:
____/____/____	<input type="checkbox"/> Weekly on Fridays	<input type="checkbox"/> Pledged \$ _____
	<input type="checkbox"/> Semi-monthly on the 1 <sup>st</sup> and 15 <sup>th</sup>	<input type="checkbox"/> Non-pledged \$ _____
	<input type="checkbox"/> Monthly on the 1 <sup>st</sup>	<input type="checkbox"/> Other _____ \$ _____
	<input type="checkbox"/> Monthly on the 15 <sup>th</sup>	<b>Total</b> \$ _____
<b>AGREEMENT</b>		
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 the authorization.		
Authorized Signature: _____ Date: _____		

**Please attach voided check here.**