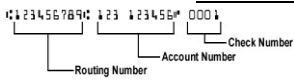


CAPITAL CAMPAIGN AUTOMATIC WITHDRAWAL AUTHORIZATION FORM

First United Methodist Church
Brighton • Whitmore Lake

FOR OFFICE USE ONLY	ENVELOPE/DONOR #	DATE
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Effective date of Capital Campaign authorization: _____		
Type of Authorization Form:		
<input type="checkbox"/> Change credit card information	<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
Please debit my donation from my (check one): <input type="checkbox"/> Checking Account (attach a voided check below) <input type="checkbox"/> Savings Account (contact your financial institution for Routing #) <input type="checkbox"/> Credit Card _____ exp. _____		Routing Number: _____ Valid Routing # must start with 0, 1, 2, or 3 Account Number: _____ 
DATE OF FIRST DONATION: ____/____/____	FREQUENCY AND AMOUNT OF CAPITAL CAMPAIGN FUND DONATION(S): <input type="checkbox"/> Monthly on the 1 ST \$ _____ <input type="checkbox"/> Monthly on the 10 th \$ _____ <input type="checkbox"/> Monthly on the 20 th \$ _____ <input type="checkbox"/> Same date as General \$ _____	
DATE OF LAST DONATION: ____/____/____		
AGREEMENT 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 (if last donation date not provided). Authorized Signature: _____ Date: _____		

Please attach voided check here.