The Lewiston Church of the Brethren **ES7244**

AUTHORIZATION AGREEMENT FOR AUTOMATIC WITHDRAWAL OF FUNDS

Envelope #_____(leave blank if not applicable)

Name (please print)_____

Address_____

City_____State_____Zip_____

I would like to make the following regular contribution(s):

Church Fund	**Dollar Amount**	**Frequency** (please check one for each church fund):	**Start Date**
❑ General Offering	$_____	❑ Weekly – Mondays ❑ Semi-Monthly – 1st and 15th ❑ Monthly – 1st or 15th (circle one)	____/____/____
❑ Missions	$_____	❑ Weekly – Mondays ❑ Semi-Monthly – 1st and 15th ❑ Monthly – 1st or 15th (circle one)	____/____/____
❑ Sunday School	$_____	❑ Weekly – Mondays ❑ Semi-Monthly – 1st and 15th ❑ Monthly – 1st or 15th (circle one)	____/____/____
❑ Building Fund	$_____	❑ Weekly – Mondays ❑ Semi-Monthly – 1st and 15th ❑ Monthly – 1st or 15th (circle one)	____/____/____

Please debit my contributions from my (check one):

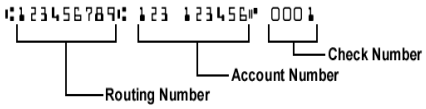
❑ Checking Account ***– attach a voided check below***

❑ Savings Account ***– contact your financial institution for the appropriate Routing Number***

Routing Number:_____

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

Account Number:_____



I authorize **The Lewiston Church of the Brethren** and **Vanco Services, LLC** to process debit entries from my account. I understand that this authorization will remain in effect until I provide reasonable notification of its termination.

Signature:_____ Date: _____