Electronic Funds Transfer – University UMC

Please print:

Name(s) ❑ Mr. ❑ Mrs. ❑ Ms. _____

Address _____

City/State/Zip _____

Member Authorization

❑ New Authorization Effective Date _____

❑ Change Contribution Date ❑ Change Contribution Amount

❑ Change Financial Institution Account ❑ Discontinue Electronic Giving

I authorize University United Methodist Church and Vanco Services, LLC to process debit entries to my account. **I have attached a voided check or savings deposit slip.** This authority is to remain in full force and effect until UUMC has received written notification from me (or either of us) of its termination in such time and in such manner as to afford UUMC & Vanco a reasonable opportunity to act on it.

Authorized signature on my account:

_____

Date_____

Annual Contribution

❑ Weekly (transfers on Mondays) $ _____

❑ Semi-monthly (transfers on 1st & 15th) $ _____

❑ Monthly: choose the date: ❑ 1st ❑ 15th $ _____

❑ Quarterly $ _____

begins: ❑ January ❑ April ❑ July ❑ October

Special Contribution

❑ Easter Offering (transferred April 1) $ _____

❑ Christmas Offering (transferred Dec. 15) $ _____

Account Information

Name of Financial Institution: _____

❑ Checking Account (attach a voided check)

❑ Savings Account (attach a savings deposit slip)

Routing number_____

(starts with 0,1,2,3; is 9 digits long; located a bottom of check between these symbols : :)

Account number _____