



# Authorization Form

**First United Methodist  
Church of Santa Barbara**

**92235884147**

**FOR OFFICE USE ONLY**

**ENVELOPE #**

**DATE**

Type of Authorization Form:

<input type="checkbox"/> New authorization	<input type="checkbox"/> Change banking/credit card 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

Phone No

**Date of first donation:**

\_\_\_\_/\_\_\_\_/\_\_\_\_

**Frequency of donation:** (please check only one)

- Semi-monthly on the 1<sup>st</sup> and the 15<sup>th</sup>
- Monthly on the 1<sup>st</sup>
- Monthly on the 15<sup>th</sup>

**Church fund designations and amounts:**

General Fund -Envelopes \$ \_\_\_\_\_

**Total** \$ \_\_\_\_\_

**Special Instructions:**

**Annual contributions:**

- Easter Offering \$ \_\_\_\_\_
- Christmas Offering \$ \_\_\_\_\_

Transferred on April 1<sup>st</sup>

Transferred on December 15<sup>th</sup>

**CHECKING / SAVINGS**

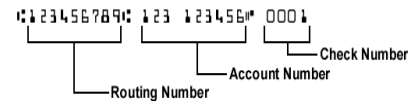
Please debit my donation from my (check one):

- Savings Account (contact your financial institution for Routing #)
- Checking Account (attach a voided check below)

Routing Number: \_\_\_\_\_

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

Account Number: \_\_\_\_\_



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.**