

# AUTHORIZATION FORM

Crossroads Community Church

ES16013

FOR OFFICE USE ONLY	ENVELOPE/DONOR #	DATE
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Effective date of authorization: \_\_\_\_\_

Type of Authorization Form:

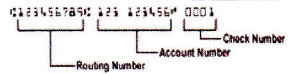
<input type="checkbox"/> New Authorization	<input type="checkbox"/> Change banking information
<input type="checkbox"/> Change donation amount	<input type="checkbox"/> Discontinue electronic donation
<input type="checkbox"/> Change donation date	

Last Name	First Name
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Address

City	State	Zip
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Email Address

<p>Please debit my donation from my (check one):</p> <p><input type="checkbox"/> Checking Account (attach a voided check below)</p> <p><input type="checkbox"/> Savings Account (contact your financial institution for Routing #)</p>	<p>Routing Number: _____</p> <p><i>Valid Routing # must start with 0, 1, 2, or 3</i></p> <p>Account Number: _____</p> <div style="font-size: small; margin-top: 5px;">  <p>Routing Number      Account Number      Check Number</p> </div>
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<p><b>DATE OF FIRST DONATION:</b></p> <p>____/____/____</p>	<p><b>FREQUENCY OF DONATION:</b> (check only one)</p> <p><input type="checkbox"/> Weekly on Mondays</p> <p><input type="checkbox"/> Semi-monthly on the 1<sup>st</sup> and 15<sup>th</sup></p> <p><input type="checkbox"/> Monthly on the 1<sup>st</sup></p> <p><input type="checkbox"/> Monthly on the 15<sup>th</sup></p> <p><input type="checkbox"/> One-time</p>	<p><b>FUNDS AND AMOUNTS:</b></p> <p><input type="checkbox"/> General \$ _____</p> <p><input type="checkbox"/> Fellowship Fund \$ _____</p> <p><input type="checkbox"/> Missions \$ _____</p> <p style="text-align: right;"><b>Total</b> \$ _____</p>
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**AGREEMENT**

I authorize the above church 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: \_\_\_\_\_

