



**Coralville United  
Methodist Church**

**Authorization Form**

**Electronic Funds Transfer**

**15005552296**

**FOR OFFICE USE ONLY**

**ENVELOPE #**

**DATE**

Type of Authorization Form:  New authorization  Change banking/credit card information  
 Change donation amount  Discontinue electronic donation  
 Change donation date

Last Name

First Name

Address

City

State

Zip

**Date of first donation:**

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

**Date of last donation:**

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

**Frequency of donation:**

- Weekly on Mondays
- Bi-Weekly
- Semi-Monthly – 1<sup>st</sup> and 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 Offering \$ \_\_\_\_\_
- 220/220 Campaign \$ \_\_\_\_\_
- Coralville Comm. Food Pantry \$ \_\_\_\_\_
- Tuition – Grace Garden Preschool \$ \_\_\_\_\_
- Before & After School- G.G. Preschool \$ \_\_\_\_\_
- Brew Crew Coffee Club \$ \_\_\_\_\_
- Soup Bowl \$ \_\_\_\_\_

**Total Contribution Amount \$ \_\_\_\_\_**

**Annual contributions:**

- Easter Offering \$ \_\_\_\_\_ Transferred on April 1<sup>st</sup>
- Christmas Offering \$ \_\_\_\_\_ Transferred on December 15<sup>th</sup>
- \_\_\_\_\_ \$ \_\_\_\_\_ Date to be transferred \_\_\_\_/\_\_\_\_/\_\_\_\_

**CHECKING / SAVINGS**

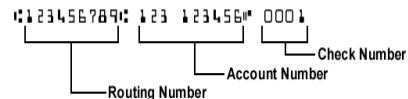
Please debit my donation from my (check one):

- 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.**