

## AUTHORIZATION FOR DIRECT PAYMENT OF OFFERINGS

I authorize American Reformed Church to initiate entries to my checking/savings account. This authority will remain in effect until I notify you in writing to cancel it in such a time as to afford the church a reasonable opportunity to act on it. I can stop payment of any entry by notifying my financial institution 3 days before my account is charged.

Name of Your Bank: \_\_\_\_\_

Address of Your Bank: \_\_\_\_\_

\_\_\_\_\_

**City                      State                      Zip**

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

**Bottom Left numbers on your check**

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

**Bottom Middle numbers on your check**

Is it a Checking or Savings:              **Checking              Savings**  
*(Circle one)*

Recurring charge:      Weekly - your account is generally charged on Fridays  
Monthly- choose either 1<sup>st</sup> of the month or 15<sup>th</sup> of the month

I would like my account charged:              **Weekly              Monthly 1<sup>st</sup>              Monthly 15<sup>th</sup>**  
*(Circle One)*

Offering Amount:    \$ \_\_\_\_\_ (enter grand total you want debited from your account)

I would like my offering applied to :

|                               |                   |
|-------------------------------|-------------------|
| General Fund \$ _____         | (enter an Amount) |
| Building Fund \$ _____        | (enter an Amount) |
| Benevolent Fund \$ _____      | (enter an Amount) |
| Grow for God's Glory \$ _____ | (enter an Amount) |

Your Name:                      .....  
\_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

**City                      State                      Zip**

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Please include a voided check