

MOUNT VERNON UNITARIAN CHURCH

AUTOMATIC PAYMENT AUTHORIZATION

I hereby authorize Mount Vernon Unitarian Church to debit my ___ checking account ___ savings account at the financial institution listed below on a monthly basis in the amount specified below. **This authority will remain in effect until the Church and my financial institution have received my notification of its termination in such time as to afford a reasonable opportunity to act on it.** I understand that both the Church and the financial institution indicated also have the right to terminate this contribution plan or my participation in it.

Bank name: _____ Account number: _____

Routing number (9 digits at the bottom of your check or deposit slip): _____ Name of account holder (please print):

Monthly donation amount: _____ \$100 _____ \$150 _____ \$200 _____ \$500 _____ \$750 _____ Other

Contribution to: ___ Annual pledge ___ Capital Campaign ___ Endowment

Day of the month for donation: 3rd _____ 17th _____ Date of first donation: _____

I understand that Mount Vernon Unitarian Church will withdraw funds directly from my bank account once per month on the day of the month indicated above. I understand that these donations will continue until I notify the church office to discontinue them or to change the amount.

Signature: _____ Date: _____

Please attach a voided check or deposit slip and return with this form to: Al Erickson , Church Treasurer, MVUC.