

## Automatic Withdrawal Authorization (Please print this form & return to Finance Office)

I / We wish to pay our 2019 commitment using automatic withdrawal from the following account:

- Checking     Savings     Credit     Debit

Please complete the section below:

Name as it appears on account \_\_\_\_\_

I authorize First Presbyterian Church of Ann Arbor to keep my signature on file and to deduct from my account for the payment of my/our commitment. I direct that the sum of \$ \_\_\_\_\_ be deducted from my account every:

- Month     Quarter     Half-Year     Year

Please complete **EITHER** the Checking/Savings section **OR** the Credit/Debit Authorization Section below.

### Checking/Savings Withdrawal Authorization

*This is the preferred payment option. Bank fees are less for checking/savings withdrawals than for credit card processing.*

Bank Routing # \_\_\_\_\_

Account # \_\_\_\_\_

### Credit/Debit Card Authorization

*The credit card company deducts a processing fee.*

Card # \_\_\_\_\_

Expiration Date \_\_\_\_\_

- I would like to help defray the cost of the processing fee (up to an additional 3.5%).
- I would like to make **ONE-TIME AUTOMATED PAYMENTS** in the amount specified below to the following PC(USA) special offerings:

\_\_\_\_\_ One Great Hour of Sharing - April 21, 2019

\_\_\_\_\_ Pentecost - June 9, 2019

\_\_\_\_\_ Peace & Global Witness - October 6, 2019

\_\_\_\_\_ Christmas Joy - December 22, 2019

By signing this authorization, I confirm my understanding that I control my payments, and if at any time I decide to discontinue this service, I will notify the church and request cancellation. I understand all information provided will remain confidential.

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