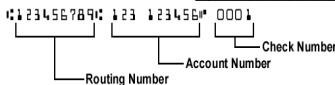


# AUTHORIZATION FORM

Lake Oswego United Church of Christ

UCC70260

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	
Address		
City	State	Zip
Email Address		
Please debit my donation from my: (check one) <input type="checkbox"/> Checking Account (attach a voided check below) <input type="checkbox"/> Savings Account (contact your financial institution for Routing #)	Routing Number: _____ <b>Valid Routing # must start with 0, 1, 2, or 3</b>  Account Number: _____  <small>Routing Number                      Account Number                      Check Number</small>	
<b>DATE OF FIRST DONATION:</b> _____/_____/_____	<b>FREQUENCY OF DONATION:</b> (check only one) <input type="checkbox"/> Monthly on the 1 <sup>st</sup> <input type="checkbox"/> Monthly on the 15 <sup>th</sup> <input type="checkbox"/> Semi-Monthly – 1 <sup>st</sup> and 15 <sup>th</sup>	<b>FUNDS AND AMOUNTS:</b> <input type="checkbox"/> General Fund                      \$ _____ <input type="checkbox"/> Building Fund                      \$ _____  <div style="text-align: right;"><b>Total</b> \$ _____</div>
<b>AGREEMENT</b> 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: _____		

Please attach voided check here.

UNITED CHURCH  
OF CHRIST

