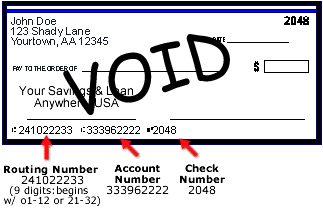
**Neland Avenue CRC**

**Ongoing Automatic Withdrawal Authorization Agreement**

This Automatic Withdrawal Agreement is used for authorizing Neland Avenue Christian Reformed Church to withdraw donations directly from your bank account on the **15th of each month**.

**Monthly Donation Details:**

|  |  |
| --- | --- |
| Fund | Monthly Donation |
| General Fund | $ |
| Christian Education | $ |
| Mission Fund | $ |
| Benevolence | $ |
| Building Fund | $ |
| Building Project Pledge | $ |
| Special Cause  (varies weekly) | $ |
| Total Monthly Donation | $ |

**Notes**

IF WITHDRAWAL IS FROM YOUR CHECKING ACCOUNT, PLEASE ATTACH A VOIDED CHECK

1. **Special Causes:** The special cause changes weekly. The monthly amount indicated in the table above will be divided equally among the weekly special causes. Feel free to give more during the offering to any cause you would like to support beyond what is indicated above.
2. **Giving Statements:** Automatic donations will be included in your annual giving statements along with any other donations you make using your donation envelopes.
3. **Additional Giving:** Feel free to make additional donations using your donation envelopes.
4. **Changing Donation Amounts**: You can change the amounts of your donations at anytime. Simply email a request to **elenbaasruth@gmail.com**. We recommend an annual review of your giving amounts.
5. **Ongoing Agreement:** This is an ongoing monthly agreement and will continue each month until you notify Neland Ave CRC of a change or cancellation.

**Account Details**

Type of account: \_\_\_checking \_\_\_ savings

Routing # (9 digits): \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ Account # (10 digits): \_\_\_ \_\_\_ \_\_\_ \_\_\_ \_\_\_ \_\_\_ \_\_\_ \_\_\_ \_\_\_ \_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Authorization Agreement For Automatic Withdrawals:**

I hereby authorize and request Neland Ave CRC to make monthly withdrawals in the amount listed above by initiating debit entries to my account indicated on the voided check copy provided, and I authorize and request bank to accept my debit entries initiated by Neland Ave CRC. This authority is to remain in full force and effect until Neland Ave CRC has received written notification (within 10 business days of withdrawal date) of its termination in such time and in such manner as to afford Neland Ave CRC and DEPOSITORY reasonable opportunity to act on it. Payments due on nonbanking days will be withdrawn on the next banking day. This form replaces any existing Authorization Agreements.

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

**Place the completed form and a voided check in an envelope in Ruth Elenbaas’ mailbox or in the church office.**

**For security reasons - DO NOT email a completed form.**