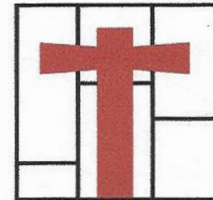


Please complete the form below to enjoy the convenience of electronic giving.

Direct Debit Giving is used to automatically transfer funds from your checking or savings account to the church's bank account.

Credit Card Giving lets you make offerings automatically on a predetermined schedule using a credit card.



AUTHORIZATION FORM	
Church Name: Burr Ridge United Church of Christ	UCC160452
Your Name: _____	
Address: _____	
City, State, Zip: _____	
Email Address: _____	
I would like to make the following contribution(s):	
Amount: \$ _____	Date of first contribution: ____/____/____
Frequency of contribution (<i>please check only one</i>):	
<input type="checkbox"/> Semi-monthly – 10 th and 20 th	<input type="checkbox"/> Monthly on the 20 th
<input type="checkbox"/> Monthly on the 10 th	<input type="checkbox"/> Monthly on the 20 th
Direct Debit	
<i>Complete this section if using your checking or savings account</i>	
Please debit my checking or savings account:	
<input type="checkbox"/> Checking account—attach voided check	<input type="checkbox"/> Savings account—attach voided deposit slip
Routing #:	Account #:
<small>Valid routing # must start with 0, 1, 2 or 3</small>	
I authorize Burr Ridge United Church of Christ and Vanco Services, LLC to process debit entries to the above account. I understand that this authority will remain in effect until I provide reasonable notification to terminate the authorization.	
Authorized Signature: _____	Date: / /
Credit Card	
<i>Complete this section if using your credit card</i>	
Please charge my (check one):	
<input type="checkbox"/> Visa	<input type="checkbox"/> MasterCard
<input type="checkbox"/> Discover	<input type="checkbox"/> American Express
Card #:	Expiration Date:
Name on card:	
Billing Address (if different from above):	
I authorize Burr Ridge United Church of Christ and Vanco Services, LLC to charge the above card. I understand that this authority will remain in effect until I provide reasonable notification to terminate the authorization.	
Authorized Signature: _____	Date: / /

Please return completed form to the church office.