



**AUTOMATED CLEARING HOUSE DEBIT AUTHORIZATION**

Set-Up New Transfer     Change Existing Transfer     Delete Existing Transfer

I/we \_\_\_\_\_, hereby authorize Trinity United Church of Christ (hereinafter called "Church"), to initiate debit entries to my/our \_\_\_checking \_\_\_savings account indicated below, at the depository named below (hereinafter called "Bank"), to debit the same to such account.

Giving Number# \_\_\_\_\_ Telephone Number \_\_\_\_\_

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

Bank Transit/ABA No.: \_\_\_\_\_ Account No.: \_\_\_\_\_

Telephone: \_\_\_\_\_

(PLEASE ATTACH A VOIDED CHECK)

Transfer Option:

<input type="checkbox"/> Weekly	Effective Date: _____	Amount: \$ _____
<input type="checkbox"/> Bi-Weekly	Effective Date: _____	Amount: \$ _____
<input type="checkbox"/> 1st of the month	Effective Date: _____	Amount: \$ _____
<input type="checkbox"/> 15th of the month	Effective Date: _____	Amount: \$ _____
<input type="checkbox"/> Bi-Monthly (Dates ____ & ____)	Effective Date: _____	Amount: \$ _____
<input type="checkbox"/> Monthly (Date _____)	Effective Date: _____	Amount: \$ _____

Please allocate my giving as follows:

	Amount		Amount
90 Tithe (10% or more)		91 General Offering (less than 10%)	
01 Deacon Benevolence		140 Raise the Roof	
02 Scholarship		25 Operation Share	
15 Food Share		130 Our Church's Wider Mission (UCC)	

I understand that a new transfer will begin on the start date given (or the next scheduled frequency), to be not less than thirty (30) days from the date of this authorization. This authority is to remain in full force and effect until Church and Bank have received written notification from me/us of its termination in such manner as to afford Church and Bank a reasonable opportunity to act.

Signature \_\_\_\_\_

Date \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

Accounting Office Use Only

Completed by: \_\_\_\_\_ Reviewed by: \_\_\_\_\_

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