



EMMANUEL GOSPEL CENTER, INC.

Electronic Funds Transfer (EFT) Authorization Form

P.O. Box 180245 • Boston, MA 02118 • (Tel) 617-262-4567 • (Fax) 617-437-9706

Effective date of authorization: _____ (mm/dd/yyyy)

Type of Authorization Form: New authorization Change banking information
 Change donation amount Discontinue electronic donation
 Change donation date Change designated funds

Title: Dr. Rev. Mr. Mrs. Ms.

Last Name

First Name

Address

City

State

Zip code

Please debit my donation from my (check one): Checking account (attach a voided check) Savings account

Routing Number: _____ (Valid routing # must start with a 0, 1, 2, or 3)

Account Number: _____ (Contact your financial institution for svgs routing #)

Date of first contribution: ____ / ____ / _____ (mm/dd/yyyy)

Frequency of donation:

- Monthly on the 1st
 Monthly on the 15th
 Quarterly on Jan. 1st, Apr. 1st, Jul. 1st, & Dec. 1st
 Annually on Dec. 1st
 One time

Fund designations and amounts:

General Fund \$ _____
 _____ \$ _____
 _____ \$ _____
 _____ \$ _____
Total \$ _____

Special Instructions:

AGREEMENT

I authorize the Emmanuel Gospel Center, Inc., and Vanco Services, LLC, 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 submit form by FAX or POSTAL MAIL to protect your personal information. ***



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Guidelines

To begin the process, you must submit a signed EFT Authorization Form. Please be sure that all the information is accurate and, if you are using a checking account, that you have attached a voided check. For a list of staff and ministries to support (under the “Fund designation” section on the form), go to <http://egc.org/donate> .

To change your bank or account, submit a signed EFT Authorization form with the new bank information.

To change donation amounts and/or funds that you are supporting, submit a signed EFT Authorization form with the new information. For a list of staff and ministries to support (under the “Fund designation” section on the form), go to <http://egc.org/donate> .

To protect your personal information, please send the form by FAX or POSTAL MAIL.

Timing

The EFT company begins the process three (3) business days before the actual donation date. The donation will leave your bank account on the donation date. Once the process has begun, no changes can be made.

“Business days” are weekdays. Saturdays, Sundays, and federal holidays are not counted.

Questions?

If you have any questions or need an EFT Authorization Form, feel free to contact us, or download the form from our website at <http://egc.org/donate> .

Contact: Charlotte Schulz, Bookkeeper, at 617-262-4567 or cschulz@egc.org .