

AUTHORIZATION AGREEMENT FOR ELECTRONIC GIVING

I hereby authorize First Christian Church (Disciples of Christ) of Paris, Illinois to initiate debit entries to my checking account as indicated below. This agreement will remain in effect until First Christian Church of Paris is notified in writing to cease the transfer.

Please Print: Name _____

Address _____

City _____ State _____ Zip _____ Phone _____

Your Bank Name _____

Your Account # _____

Bank Routing # _____

Amount of Donation \$ _____ per month

Fund Designation:

General Fund	\$ _____
Disciples Outreach	\$ _____
Building Fund	\$ _____
Other Designation	\$ _____

to _____

Send this completed form to:

First Christian Church
201 S. Main St.
Paris, IL 61944

Questions? Call: 217-466-3255
or email: firstchristian@nwcable.net

**Donations will be transferred between the 20th - 25th of each month.*

Month/Year to Begin _____

Please submit a copy of a voided check or a deposit slip.

Signature _____

Please Initial:

_____ I understand I can cancel this agreement at any time, but must do so in writing to the Financial Secretary of First Christian Church in advance.

_____ I understand that I, along with all others, will be given the opportunity to change the amount of donation during the annual fall Financial Campaign.

_____ If I have questions, I am free to call the church office or the Financial Secretary.