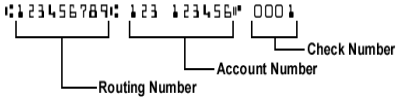


AUTHORIZATION FORM

FOR OFFICE USE ONLY	ENVELOPE/DONOR #	DATE
<p>Church of St. Michael</p> <p>Effective date of authorization: _____ / _____ / _____</p> <p>Type of Authorization Form: <input type="checkbox"/> New Authorization <input type="checkbox"/> Change banking information <input type="checkbox"/> Change donation amount <input type="checkbox"/> Discontinue electronic donation <input type="checkbox"/> Change donation date</p>		
Last Name		First Name
Address		
City		State Zip
Email Address		
<p>FIRST DONATION DATE:</p> <p>_____ / _____ / _____</p>	<p>FREQUENCY OF DONATION:</p> <p><input type="checkbox"/> Weekly on _____</p> <p><input type="checkbox"/> Monthly on _____</p> <p><input type="checkbox"/> Semi-Monthly (transferred on 1st and 15th of each month)</p>	<p>FUNDS AND AMOUNTS:</p> <p><input type="checkbox"/> Sunday Contributions \$ _____</p> <p><input type="checkbox"/> _____ \$ _____</p> <p><input type="checkbox"/> _____ \$ _____</p>
CHECKING / SAVINGS	<p>Please debit my donation from my (check one):</p> <p><input type="checkbox"/> Savings Account (contact your financial institution for Routing #)</p> <p><input type="checkbox"/> Checking Account (attach a voided check below)</p>	<p>Routing Number: _____</p> <p>Valid Routing # must start with 0, 1, 2, or 3</p> <p>Account Number: _____</p> <p style="font-size: small;">  </p>
	<p>I authorize the above church 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.</p> <p>Authorized Signature: _____ Date: _____</p>	
CREDIT CARD	<p>Please charge my donation to my (check one): <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> American Express <input type="checkbox"/> Discover Card</p>	
	Credit Card Number:	Expiration Date:
	Name on Card:	
	Billing Address (if different from above):	
	<p>I authorize the above church to charge my credit card in accordance with the information above.</p> <p>Signature (as it appears on the credit card): _____ Date: _____</p>	

Please attach voided check over credit card section above if using checking account.