AUTHORIZATION FORM

Congregational Church of San Mateo **UCC021090**

FOR OFFICE USE ONLY	ENVELOPE/DONOR #	DATE

Effective date of authorization: _____

Type of Authorization Form:
- ❑ New Authorization
- ❑ Change pledge amount
- ❑ Change pledge date
- ❑ Change banking information
- ❑ Discontinue electronic pledge

Last Name	First Name	
Address		
City	State	Zip

FUNDRAISERS

SENIOR HIGH FUNDRAISING _____/_____/____ (Start Date) $ _____ (Pledge Amount)
GENERAL FUNDRAISING _____/_____/____ (Start Date) $ _____ (Pledge Amount)

ONE TIME GIFT: _____/_____/_____ (Start Date) $ _____ (Pledge Amount)

MONTHLY GIVING: _____/_____/_____ (Start Date)
- ❑ Monthly on the 5th
- ❑ Monthly on the 20th

$ _____ (Pledge Amount)

QUARTERLY GIVING: _____/_____/_____ (Start Date)
- ❑ Quarterly on the 5th
- ❑ Quarterly on the 20th

$ _____ (Pledge Amount)

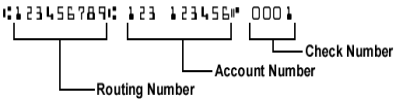
HOLIDAY GIVING:
- ❑ Easter Offering $ _____ Transferred on April 15th
- ❑ Christmas Offering $ _____ Transferred on December 15th
- ❑ Thanksgiving $ _____ Transferred on November 28th

CHECKING / SAVINGS

Please debit my donation from my (check one):
- ❑ Savings Account (contact your financial institution for Routing #)
- ❑ Checking Account (staple a voided check below)

Routing Number: _____
Valid Routing # must start with 0, 1, 2, or 3

Account Number: _____



I authorize Congregational Church of San Mateo 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:_____

CREDIT CARD

Please charge my donation to my (check one): ❑ Visa ❑ MasterCard ❑ Discover Card

Credit Card Number:	Expiration Date:
Name on Card:	
Billing Address (if different from above):	

I authorize Congregational Church of San Mateo and Vanco Services, LLC to charge my credit card in accordance with the information abo

Signature (as it appears on the credit card): _____ Date: _____