

Trinity Episcopal Church of Arlington, Virginia
ATTN: Financial Secretary
2011 Stewardship Pledge

Electronic Funds Transfer Authorization Form

Today's date: _____
 Month, Day, Year

For Office Use Only:	
Pledge # _____	Vanco Client # ES10879

- Type of Authorization Information:
- | | |
|--|--|
| <input type="checkbox"/> New Authorization | <input type="checkbox"/> Change donation amount |
| <input type="checkbox"/> Change donation date | <input type="checkbox"/> Change bank information |
| <input type="checkbox"/> Discontinue electronic donation | |

Last Name	First Name	
Address	Apt. #	
City	State	Zip

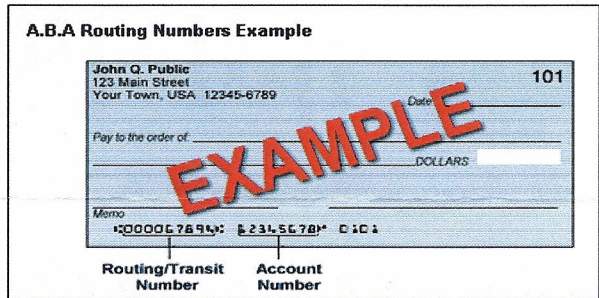
Please debit my gift from my (check one): <input type="checkbox"/> Checking Account (attach a voided check) <input type="checkbox"/> Savings Account (contact your financial institution for routing #)	Bank Routing Number _____ <i>NOTE: Valid Routing # must start with 0, 1, 2, or 3</i> Bank Account Number _____
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Total Amount of Pledge: \$ _____

Distribution of Total Pledge

<input type="checkbox"/> General Operating	\$ _____
<input type="checkbox"/> Handicap Ramp	\$ _____
<input type="checkbox"/> Grounds/Landscaping	\$ _____
<input type="checkbox"/> Trinity School	\$ _____
<input type="checkbox"/> Rector's Discretionary Fund	\$ _____

Other special gifts are best made by direct donation to the church.



Frequency of pledge payment: *(check only one)*
 (Total Amount of Pledge indicated above will be divided over the year)

<input type="checkbox"/> Weekly – Mondays (52 payments for '11)
<input type="checkbox"/> Semi-monthly – 5 th and 20 th (24 payments for '11)
<input type="checkbox"/> Monthly – 5 th (12 payments for '11)
<input type="checkbox"/> Monthly – 20 th (12 payments for '11)

Date for first pledge payment by electronic transfer: ____/____/____

Agreement

I authorize Trinity Episcopal Church of Arlington, Virginia 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. I also understand that once the amount of my total pledge is reached, debits will be discontinued and this agreement will terminate automatically.

Authorized Signature: _____

Date: _____