FAITH BAPTIST CHURCH YOUNGSVILLE, INC.
Authorization Agreement for Automatic Draft of Tithes & Offerings

FAITH
YOUNGSVILLE

Automatic Draft of your tithes and offerings is a service which electronically moves funds from your financial institution to deposit in Faith Baptist Church's bank. We will continue to provide you with a charitable deduction statement at the end of the year. In addition, you will see the amount and date of the draft reflected on your monthly bank statement. To receive the many benefits of this service, you will need to complete and sign the form below. Because virtually all financial institutions participate in the automatic draft program, there should be no need to alter your current banking arrangement. **Consider the following benefits:** 1) You can continue to give even if you are out of town, 2) There is no need to use church envelopes, 3) Being electronic, you don't have to worry about lost or stolen checks, 4) Drafting affords greater confidentiality, 5) There is no cost for your participation in the program, 6) Automatic drafting works in tandem with Faith's software program to ensure greater accuracy of your giving record.

○ **New Set-Up**   ○ **Change in Account Number/Bank**   ○ **Change in Existing Deduction**

Today's Date: _____   Effective Date: _____

Contributor Name: _____

Social Security #: _____

Draft the account below on the ○ 7th ○ 14th ○ 21st ○ 28th of each month. *Choose one or any combination of the dates.*

I hereby authorize Faith Baptist Church to draft my account and initiate debit entries or such adjusting entries, either Debits or Credits which are necessary for correction, to the account(s) and bank(s) I have indicated below.

DRAFT FORM	BANK NAME	CITY, STATE, ZIP	ABA NUMBER	ACCOUNT NUMBER	AMOUNT
Checking					

This authorization is to remain in full force and effect until Faith Baptist Church has received a new agreement from me of its termination in such manner as to afford the Faith Baptist Church a reasonable opportunity to act on it.

Signature of Contributor: _____

If you would like to participate in the Automatic Draft program,
PLEASE ATTACH A VOIDED CHECK HERE.