**To select Electronic Funds Transfer (EFT),**

**please complete the following and return it to church office.**

To keep this information confidential, enclose in an envelope, to the attention **Finance Team,** and mark it **“Confidential”.**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City/State/Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: (Home)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: (Cell)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***Ebenezer UMC is authorized to arrange an EFT***in the Amount of $\_\_\_\_\_\_\_\_\_\_\_ to be processed*:*

 **\_\_\_** Weekly \_\_\_ Biweekly \_\_\_ Monthly \_\_\_ Other\_\_\_\_\_\_\_\_\_\_\_\_\_ Date to Begin \*\_\_\_\_\_\_\_\_\_\_\_

* Be sure that your Date to Begin allows enough time for your income/deposit to be available.

\_\_\_\_ This a **change** to an Existing EFT \_\_\_\_I want to start a **New** EFT; **requires submittal of a cancelled check.**

**Signature** (Authorization for EFT) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_

Note: Withdrawals will be made on the indicated day UNLESS it is a non-banking business day, in which case the withdrawal will take place on the next banking business day.

***EFT Withdrawals will begin January 2020*** unless otherwise specified.

You may mail the completed form with your cancelled check to

Ebenezer UMC

1589 Steeple Drive

Suffolk, VA 23433