

2070 Ridgecliff Rd. Columbus, OH 43221 (614)451-6677 fax (614)451-1326 covenant@covenantpcusa.org

Automatic Debit Authorization Form

With Automatic Debit, your monthly contribution will be automatically deducted from an account you designate.

To enroll, complete all information and be sure to sign the authorization form below.

 Name				
Address Ci	ity	State	Zip code	
Phone number		Email		
Name of bank		Amount to be debited from your account		
Bank routing number (9 digit #)		Checking/Savings account number		
Frequency: Monthly (15 th of t	the month)			
Authorization:				
l,		_, on	authorize	
Signature of bank account holder		Date		

Covenant Presbyterian Church to automatically debit the bank specified on this form to collect my contribution to the Church from my checking/savings account. I understand that I many discontinue participation in Automatic Debit at any time by informing Covenant Presbyterian Church of my intentions in writing.

Please return completed form to Ingrid Smith.