



Pre-Authorized Giving

I (we) authorize Marysville Baptist Church and the Progressive Credit Union to debit my (our) account for the amount shown below. This authority will remain in effect until I (we) authorize cancellation. I (we) further understand that all changes of status to this agreement may take up to 10 business days to be processed.

I (we) authorize Marysville Baptist Church and Progressive Credit Union to debit my account (check one):

_____ Weekly

_____ Bi-weekly

_____ Twice/Month on the 15th & 30th

_____ Monthly

Please indicate the start date: _____

Donor's Name/s: _____

Amount: \$ _____

Mailing Address & Phone Number:

Breakdown of Amount: General Fund _____ Missions _____

Financial Institution & Address:

Today's Date: _____

Authorized signature: _____

Authorized signature (if joint account): _____

Effective Date of Cancelling Authorization: _____

Please attach a VOID cheque or specification form stamped by Financial Institution. Thank You for your support!