



## 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 Please indicate dates: \_\_\_\_\_ & \_\_\_\_\_

\_\_\_\_\_ Monthly

Please indicate the start date: \_\_\_\_\_

Donor's Name/s: \_\_\_\_\_

Amount: \$ \_\_\_\_\_

Your Mailing Address & Phone Number:

Breakdown of Amount: Current Expenses \_\_\_\_\_ 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! Please return to Kathy Wyrwas.**