

Hampton Baptist Church Authorization for Direct Debit

Please indicate whether this is a _____ *New Authorization* or a _____ *Change*.

I, _____, authorize Hampton Baptist Church to deduct \$_____ from the bank account below. I understand that this authorization will remain in effect until I revoke it by providing written notice to the church office or treasurer. I elect to have this amount deducted per the following schedule:

1X per month (2nd of the month) _____

1X per month (20^h of the month) _____

2X per month (2nd and the 20th) _____

Please indicate the effective date of your first deduction _____.

All efforts will be made to start your deductions on this date.

I would like the above donation designated as follows: (Please list dollar amounts)

\$_____ General Budget (includes CBF)

\$_____ Building Fund

\$_____ other, please specify _____

Please attach a voided check in addition to completing the following information:

Bank Name _____

Account Number _____ Routing Number _____

Signature _____ Date _____

Email _____ Phone Number _____