

AUTO GIVING AT FELLOWSHIP

*“Bring the whole tithe into the storehouse, that there may be food in my house. **Test me in this,**” say the Lord Almighty, “and see if I will not throw open the floodgates of heaven and pour out so much blessing that you will not have enough room for it.” Malachi 3:10*

We are pleased to offer Auto Giving at Fellowship Reformed Church.

Here’s how it works:

- Complete the Simple Enrollment Forms (sign-up form & authorization form)
- When completing the forms, determine if you want to give weekly or monthly.
- Weekly contributions will come out of your account every Monday.
- Monthly contributions will come out of your account every 3rd Monday.
- Auto Giving is available for your General giving (white form).
- Change forms are available to increase / decrease your contribution.

Benefits of Auto Giving:

- No check writing. Giving is automatic based on the established schedule (i.e. weekly or monthly)
- Eliminates mailing of checks or catch-up contributions for persons on vacation or unable to attend church in any given week.
- Giving is confidential. Contributions are tracked via your white envelope number.
- Great opportunity to facilitate your tithe / give of your first fruits (Ex 23:19; Pr 3:9).
- Program is simple, easy to join, and easy to modify, if necessary.

The participants currently in this program have found it to be a simple, hassle-free way to facilitate their church tithes.

If anyone is interested in signing up for this program, please use the applicable portion of the attached paperwork. After completing the paperwork, place it in an envelope and put it into Shelli Huizenga’s mailbox or hand it into the office. You will be contacted prior to the first auto debit to confirm the date of the initial contribution.

If you have questions regarding this program please contact Shelli Schultz. (669-1213 or sschultz@frchudsonville.org)

Please prayerfully consider your participation (Lev 27:30; 1 Co 16:2; Luke 6:38).

AUTHORIZATION AGREEMENT FOR DIRECT PAYMENTS (ACH DEBITS)

Name _____

I (we) hereby authorize _____, hereinafter called COMPANY, to initiate debit entries to my (our) **Checking Account** / **Savings Account** (select one) indicated below at the depository financial institution named below, hereafter called DEPOSITORY, and to debit the same to such account. I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of U.S. law.

Depository Name _____ Branch _____

City _____ State _____ Zip _____

Routing Number _____ Account Number _____

This authorization is to remain in full force and effect until COMPANY has received written notification from me (or either of us) of its termination in such time and in such manner as to afford COMPANY and DEPOSITORY a reasonable opportunity to act on it.

Name(s) _____ Giving Env# _____
(Please Print)

Date _____ Signature _____

NOTE: ALL DEBIT AUTHORIZATIONS *MUST* PROVIDE THAT THE RECEIVER MAY REVOKE THE AUTHORIZATION ONLY BY NOTIFYING THE ORGINATOR IN THE MANNER SPECIFIED IN THE AUTHORIZATION.

NOTE: Please include a VOID check with your enrollment, so we can verify your account information.

AUTHORIZATION AGREEMENT FOR DIRECT PAYMENTS (ACH DEBITS)

FELLOWSHIP REFORMED CHURCH
Auto Giving Form
General Fund

Name: _____

White Envelope Number: _____

I would like my auto giving amount to be:

Weekly: _____ per week (every Monday)

Monthly: _____ per month (3rd Monday of every month)

My email address is: _____
(to send confirmation)