

AUTOMATIC GIVING Authorization Form

NEW Change Cancellation

I (we) authorize The First Metropolitan Church of Atlanta ("First MCC") to initiate debit entries to my (our) account in the entity named below ("institution") and I (we) authorize the institution to accept and to debit the amount of such entries to my (our) account. Each debit will be made in the frequency marked below in an amount equal to the withdrawal amount indicated.

Frequency: __ Weekly (Day____) __ Monthly(Date(s): _____)
(Check One & Specify Day/Date)

Name as it appears on the Debit/Credit Card

Billing Address (please print)

City (please print)

State

Zip

Account Number (please print)

Expiration Date (MM/YYYY)

\$ _____ . _____

Withdrawal Amount

Start Date _____ (MM/DD/YYYY or MM/YYYY)

This authorization is to remain in full force and effect until cancelled/revoked by the signer(s) below. Any revocation will not be effective until First MCC receives a written notification from me/us of my/our desire to terminate this agreement.

Contributor's Name(s)

Account Holder's Name (please print)

Account Holder's Signature

(Joint Accounts) Account Holder's Name (please print)

Second Holder's Signature

Date of Authorization

Account Holder's Telephone Number

E-mail Address: _____