

Authorization for Electronic Funds Transfer

I authorize Woodbury/Peaceful Grove United Methodist Church and the financial institution named below to initiate entries to my checking/savings account. This authority will remain in effect until I notify you by mail or by e-mail to cancel it in such time as to afford the financial institution a reasonable opportunity to act on it. I can stop payment of any entry by notifying my financial institution 3 days before my account is charged.

Name of Financial Institution

Checking_____ Savings_____

Signature Date

Your name – Please print

Address

City, State, Zip

Account # _____

ABA/Routing # _____

Amount to transfer: \$ _____

Monthly – withdrawn on the 5th _____

Monthly – withdrawn on the 30th _____

Semi-Monthly – withdrawn on
the 15th & the 30th _____

Effective Date: _____

Important: Please attach a voided check.

✂(CUT HERE)-----

On _____ I authorized Woodbury/Peaceful Grove UMC to initiate electronic entries to my checking/savings account on the _____ &/or _____ of each month.

Amount to transfer: \$ _____

Effective date: _____

I may revoke by authorization at any time by the following methods:

E-mail:

bvanags@wumc-pgumc.org

In writing:

Barb Vanags,
Woodbury/Peaceful Grove UMC
7465 Steepleview Rd
Woodbury, MN 55125