



Electronic Funds Transfer

Please include this card along with your voided check and mail to:

Elk River House of Prayer
555 Railroad Drive NW
Suite G
Elk River, MN 55330

Elk River House of Prayer ELECTRONIC FUNDS TRANSFER AUTHORIZATION FORM

FOR OFFICE USE ONLY ES14957

DONOR #

DATE

Effective date of authorization: _____

Type of Authorization Form:

- New Authorization
- Change banking information
- Change donation amount
- Discontinue electronic donation
- Change donation date

Last Name	First Name	
Address		
City	State	Zip
Email Address		

Please debit my donation from my (check one):

- Checking Account
(attach a voided check)
- Savings Account
(contact your financial institution for Routing #)

Routing Number: _____

Valid Routing # must start with 0, 1, 2, or 3

Account Number: _____

Date of first donation:

____/____/____

Day of month:

(check only one)

- Monthly on the 1st
- Monthly on the 15th

Partnership Donation amount:

- One Thing \$7.00
- Joseph \$100.00
- Anna \$25.00
- Daniel \$300.00
- Bethany \$50.00
- Cyrus \$1000.00
- Other \$ _____

Designation

- Support for Intercessory Missionary: _____
(Account Number)
- General Funds

AGREEMENT

I authorize the above organization to process debit entries to my account. I understand that this authority will remain in effect until I provide reasonable notification to terminate the authorization.

Authorized Signature: _____

Date: _____