

St. Andrew's Episcopal Church

Electronic Funds Transfer

Pledge Contributions

Pledge Contribution Information

Please automatically deduct \$ _____ from my account
each month beginning with the month of ____/____

Note:

**Electronic Funds Transfers will be made in the third
week of each month.**

Name on the account: _____

Address: _____

City, State, Zip _____

Type of Account ___ checking ___ savings

Bank Name: _____

Account number _____

Routing number (for checking only) _____

Routing numbers must begin with 0, 1, 2, or 3 and is nine digits long.

For checking account, attach a voided check; for savings account, attach a deposit slip.

**I authorize St. Andrew's Episcopal Church and Pinnacle to process debit entries
from my checking or savings account. This authority will remain in effect until I
give reasonable written notification to terminate this authorization.**

Authorized Signature on account: _____

Date: _____

Return this completed form to:
St. Andrew's Episcopal Church
Attn: Kimberly Rathburn
2105 W. Market St. Greensboro

If you have any questions, please call the church office at 336-275-1651 ext. 1