

Saint Matthew's Episcopal Church
Electronic Funds Transfer (EFT) Donation Form 2025

Donor Information (include all names on account):

Name: Last, First

Address

Annual Pledges:

I (We) would like to pay my (our) annual pledge to the church through electronic funds transfer. Please transfer the following:

Amount: \$_____ Monthly (last Friday of each month)

Total Annual Pledge: \$_____

Bank Information:

If bank account information is unchanged from last year, please initial here: _____

If bank account information is new or has changed, please fill out below:

Type of Account: _____ Checking _____ Savings

Name(s) on Bank Account

Bank Routing Number/ABA Number (9-digits)

Bank Account Number

Bank Name

Signature Section: I (we) hereby authorize Saint Matthew's Episcopal Church to initiate debit entries to my (our) checking or savings account indicated above for payment of my donation to the church. I further authorize the bank or financial institution named above to debit such account. This authority shall remain in full force and effect until the total amount of my (our) pledge or contribution has been withdrawn. No further withdrawals are authorized from my (our) account until and if I (we) make another pledge or gift commitment and fill out another electronic funds transfer authorization form.

Account holders signature for authorization

Date

Account holders signature for authorization

Date