

**2010**  
**FIRST CONGREGATIONAL UCC**  
**AUTOMATIC WITHDRAWAL**  
**Effective January 1, 2010– December 31, 2010**

Member Name (Last, First, Middle Initial)													
Financial Institution Name (Bank, Savings Institution, Credit Union, etc.)													
Transit Routing Number (Must be 9 numbers)									Account Number				
Type of Account _____ Checking _____ Savings _____ Terminate, effective _____													
I authorize First Congregational UCC to withdraw funds from my account in the financial institution listed above. If any of the above information changes, I will promptly complete a new authorization agreement. (Please allow 2 weeks for changes or termination to take effect.)													
Date (Mo/Day/Yr)			Church Member Signature						Daytime Phone Number				
Home Address:		Street				City				State		Zip Code	

**I authorize First Congregational UCC, La Crosse, to withdraw:**

\$ \_\_\_\_\_ on the 1<sup>st</sup>

\$ \_\_\_\_\_ on the 16<sup>th</sup>

**for a monthly total of \$ \_\_\_\_\_.**

- **Checking account:** Attach a voided check to the bottom of this form.
- **Savings account:** Contact your financial institution to obtain its transit routing number.

**ATTACH A VOIDED  
CHECK OR PHOTOCOPY  
OF A CHECK.**

**Do not attach a  
deposit slip.**

**Send to: Pamela Kendall,  
Financial Secretary**  
First Congregational UCC  
2503 Main Street  
La Crosse, WI 54601

*John Smith*  
*Mary Jones*  
1000 Prairieview Lane  
Anyplace, WI 54321

Date \_\_\_\_\_ 1234

VOID

PAY TO THE ORDER OF \_\_\_\_\_ \$ \_\_\_\_\_

DOLLARS

ANYOLD BANK  
Anyplace, WI 54321

Routing Number

Account Number

For \_\_\_\_\_

**Do not include the check number**

|:250250025| : 202020086 1234

Pamela: Direct Deposit-Gen Funds