

Giving at Hope Church

Getting Started With Direct Debit Giving

- Complete the form (below) & **attach a voided check (or savings deposit ticket, if applicable) to confirm the account & bank routing numbers.** If you prefer, you may also request assistance to set it up yourself through our online system by emailing office@ehope.org.
- Place the completed form in a sealed envelope marked “Attention: Direct Debit” and place in the church offering, bring to the church office or mail to Hope Church Administrator, 11893 JFK Road, Dubuque, IA 52001. Your information is kept confidential.
- All direct deposit giving will go toward the church General Fund.
- Missions and other giving can be made through traditional worship offering.
- All contributions are 100% tax deductible.
- Update or change your giving at any time by completing a new form. To stop giving, notify the Church Administrator in writing.

Authorized Agreement for Direct Debit

I (We) hereby authorize Hope Church hereafter called “Company” to initiate debt entries to my (our) checking account indicated below and authorize the institution named, hereinafter called “Institution,” to debit the same such account. I (We) further authorize “Company” to initiate credits to my (our) account to correct any errors and “Institution” to initiate any such corrections to my (our) account. This authority is to remain in full force and effect until “Company” and “Institution” have received written notification from me (or either of us) of its termination in such time and in such manner as to afford “Company” and “Institution” a reasonable opportunity to act on it prior to depositing to the account.

Member Name (print neatly)

Member Signature

Street Address

City, State, Zip

Contact phone number (indicate home or cell)

Email address for contribution confirmations

ACCOUNT INFO:

Institution Transit ABA (Routing Number)

Institution Account Number

Institution Name

Institution Phone Number

Institution Address

City, State, Zip

Circle preferred draft frequency: Weekly Every 2 weeks Monthly Quarterly Annually

Start date: _____

Amount to be drafted: \$ _____