



## Direct Debit Authorization

Friends who give regularly to AFnet, may now have their gifts automatically deducted from their bank account through an electronic contribution authorization (ACH). If you would like to participate in this economical, and convenient way to support this ministry, please fill out the form below, and mail it back with your gift. Then, starting next month your gift will be automatically deducted on the 1st or 15th of the month, whichever you choose.

If you have any questions, please call the AFnet office at (408) 978 6777.

**May God richly bless you for your kindness!**

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## AFnet Electronic Contribution Authorization Agreement

### Gift Information

Amount of electronic gift: \$\_\_\_\_\_ Gift Schedule ☐ 1st or ☐ 15th of the month.

### Your Information

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ E-mail \_\_\_\_\_

### Designation of gift

- ☐ General Support
- ☐ Missionary \_\_\_\_\_
- ☐ Church Planting
- ☐ Leadership / Pastoral Training
- ☐ AFnetAid / Compassion Ministry
- ☐ AFnetAid / Orphan Sponsorship
- ☐ Bible Fund

### Bank Information

Type of account: ☐ Checking ☐ Savings

Name of your bank, savings & loan, or credit union \_\_\_\_\_

Branch Name \_\_\_\_\_

Address (City, State, Zip) \_\_\_\_\_

Telephone Number \_\_\_\_\_

Account Number \_\_\_\_\_

Routing Number \_\_\_\_\_

(9-digit number on bottom left of check)

I authorize AFnet to deduct funds from the account at the financial institution named above. I understand that I can stop these automatic deductions by providing written notice to AFnet or my financial institution. This authorization is to remain in effect until I revoke it.

To accurately process this request, **please fill in all of the information before printing, signing and attaching the first contribution or voided check.**

X

\_\_\_\_\_  
Your signature as shown on financial institution records

\_\_\_\_\_  
Date