

FIRST CONGREGATIONALCHURCH IN STONEHAM

ELECTRONIC GIVING PROGRAM

First Church is now able to offer you the convenience of making your pledge or offering payments thru an automated Electronic Giving Program, also known as E-Giving. We hope you'll take advantage of this program; E-Giving is a safe and convenient method for making your contributions to First Church.

The details:

- *Requests for new Programs and bank information changes for existing Programs must be submitted using the Electronic Giving Program form.*
- *You may elect to make payments once per month or twice per month (bi-monthly).*
- *A completed & signed form must be received by the Treasurer 2 weeks prior to the requested start date. Be sure to place the completed form in a sealed envelope.*
- *If the payment date falls on a non-business day, the payment will be debited on the next available business day.*
- *Your bank statement will reflect the payments as having been paid to First Church.*
- *You may cancel your Electronic Giving Program at any time. The request must be submitted to the Treasurer at least 2 weeks prior to the next scheduled payment date to be effective for that payment. (A signed note delivered to the church office or an email to [fccosfinancial@gmail](mailto:fccosfinancial@gmail.com) will be sufficient to cancel the Program.)*
- *If a payment is declined due to insufficient funds, it will not be resubmitted for collection. Declined payments must be resubmitted by personal check.*
- *The Program remains in effect from July 1st (or later requested start date) until June 30th of the following year (or earlier requested termination date).*
- *A new Electronic Giving Program form is required for each new fiscal year (July 1 – June 30th).*
- *As in the case of all financial matters, your information will be held in the strictest confidence.*

After filling out your Electronic Giving Program form, complete this section with the same information and retain for your records

Debit Information	
Withdrawal Frequency (check one)	<input type="checkbox"/> MONTHLY (1 st of each month) OR <input type="checkbox"/> BI-MONTHLY (1 st and 15 th of each month)
AMOUNT for EACH PAYMENT: \$ _____ (divide your annual pledge amount by 12 if monthly or 24 if bi-monthly)	
Start Month: _____	
If the start month is not specified, the Program will begin in July or the next available payment date.	

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Please complete this form and **attach a voided check or pre-printed deposit slip**. If a voided check or pre-printed deposit slip is not available, ask your bank for its ABA number and/or Automatic Clearing House (ACH) information. Starter checks cannot be accepted as they do not provide the necessary bank account information.

Return the completed and signed form to the Church Office, attention Treasurer, at least 2 weeks prior to the requested start date.

Member Name(s):	
Email Address:	Phone:
<i>Bank Information</i>	
Bank Name:	
Routing Number:	Account Number:
Account Type:	<input type="checkbox"/> Checking <input type="checkbox"/> Savings
<i>Debit Information</i>	
Withdrawal Frequency (check one)	_____ MONTHLY OR _____ BI-MONTHLY <small>(1st of each month) (1st and 15th of each month)</small>
AMOUNT for EACH PAYMENT: \$ _____ (divide your annual pledge amount by 12 if monthly or 24 if bi-monthly)	
Start Month: _____	
If the start month is not specified, the Program will begin in July or the next available payment date.	
<p>By signing below, I authorize First Congregational Church in Stoneham (FCC) to automatically deduct my pledge for the specified amount from my financial institution on the specified day(s), or the next available business day(s), until the last pledge payment has been made for the current fiscal year (July 1 - June 30).</p> <p>I understand that this authorization will remain in full force and effect until FCC receives written notification from me of its amendment or termination in such time and manner as to allow FCC a reasonable opportunity to act on it.</p> <p>I also authorize FCC to initiate credit or debit entries to be made to same account to rectify debit or credit entries made in error to same account. I acknowledge that the origination of ACH transactions to my account must comply with the provisions of U.S. law.</p>	
PLEDGER'S SIGNATURE:	DATE:

***Attach Voided Check or Deposit Slip Here
(A photocopy of either is acceptable)***

<i>Office use only</i> Date Received:	Date Entered:	Date Effective:
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