



For our Congregation
 ...For our Community
 ...And for our Future.

Sidney UMC Capital Campaign

ELECTRONIC PAYMENTS AUTHORIZATION

In consideration of my interest in the Sidney United Methodist Church and as an expression of thanks for God's blessings to me, I desire to help in the three-year Capital Campaign and promise to pay to the best of my ability. I authorize Sidney United Methodist Church to transfer funds from the account below in the amount and for the intervals as indicated.

156 weekly payments of \$ _____ per week totaling \$ _____
 36 monthly payments of \$ _____ per month totaling \$ _____
 _____ payments of \$ _____ per _____ totaling \$ _____

Conversion for current Capital Campaign pledges:

I have already begun my pledge, and have made _____ payments of my weekly monthly pledge. Please complete my pledge by transferring the remainder of my payments per the method indicated below.

I understand I am in full control of my payments. To make changes anytime, I will contact the Finance Secretary (Linda Hitchcock) by mail: Sidney United Methodist Church, 12 Liberty Street, Sidney, NY 13838 or email finance@sidneyumc.org

- Weekly transfers will be processed on Mondays.
- Monthly transfers for Capital Campaign will be processed on the 10th of the month.

Account Type: Checking Savings Please attach voided check or deposit slip

Bank Routing Number: (9 Characters) _____

Account Number: _____

OR

Visa

MasterCard

Discover

Acct # _____

Exp Date: _____ **CVV#** _____ (3-digit code in signature strip)

Name on Card or Account: _____

Address: _____

City/State/Zip: _____

Phone: _____ **Email:** _____

Date: _____ **Signature:** _____

Payment Information
 Please complete Banking OR
 Credit Card information

Donor Information

Completed forms should be mailed or delivered to :

Sidney United Methodist Church
ATTN: Finance Secretary
 12 Liberty Street
 Sidney, New York 13838