



## ELECTRONIC FUNDS TRANSFER

Simplify your giving by authorizing automatic monthly deduction from a checking or savings account. Complete this Authorization Form and return it to the address below.

I give my bank permission to transfer the following amount from my checking/savings account as a donation to World Team each month.

Name \_\_\_\_\_

Email \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

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

Please use my contribution(s) for the following World Team missionaries and/or projects:

A. \_\_\_\_\_

\$ \_\_\_\_\_ /mo

B. \_\_\_\_\_

\$ \_\_\_\_\_ /mo

C. \_\_\_\_\_

\$ \_\_\_\_\_ /mo

My total monthly deduction:

\$ \_\_\_\_\_ /mo

Month to begin EFT: \_\_\_\_\_

*Please send requests by the 5th of the month to be effective for that month.*

Make the monthly deduction from my:

\_\_\_\_ Checking Account    \_\_\_\_ Savings Account

Bank Name \_\_\_\_\_

Address \_\_\_\_\_

Routing No. \_\_\_\_\_

Account No. \_\_\_\_\_

I understand and agree with the information below:

I authorize World Team to transfer the total amount indicated on or about the 15th of each month, beginning in the month designated and in effect until I notify World Team. In the event of an error, I have the right to tell my bank to reverse any transfer with a written notice within 60 days of the transaction in question. World Team will provide an annual receipt by January 31 each year for funds deducted during the previous year.

Signature \_\_\_\_\_

Date \_\_\_\_\_

Questions? Contact Donor Services at:

1-800-967-7109 x80  
donorservices.us@worldteam.org

World Team

1431 Stuckert Road  
Warrington, PA 18976  
www.us.worldteam.org



Enhancing Trust