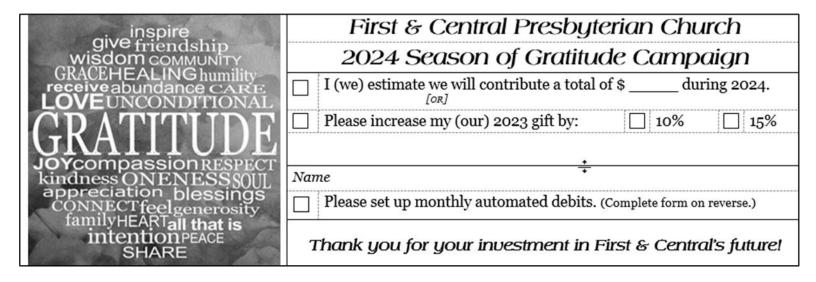
ciuc inspire	First & Central Presbyterian Church	
wisdom community	2024 Season of Gratitude Campaign	
receive abundance CARE LOVEUNCONDITIONAL	I (we) estimate we will contribute a total of \$ during 2024.	
GRATITUDE	Please increase my (our) 2023 gift by: 10% 15%	
JOY compassion RESPECT	Name +	
appreciation blessings CONNECTfeelgenerosity	Please set up monthly automated debits. (Complete form on reverse.)	
intentionPEACE SHARE	Thank you for your investment in First & Central's future!	





Debit Authorization: I (we) hereby authorize First & Central Presbyterian Church to initiate debit e account indicated below and the financial institution named below to debit the same to such account. <u>I</u> that the origination of ACH transactions to my (our) account must comply with the provisions of the provision of the prov	(we) acknowledge	YOUR NAME 234 Main Street Asymburs, CO BOODO PAY TO THE CROBER OF	123 DATE \$ DOLLARS
Financial Institution Name			CHECK
		NUMBER NUMBER	NUMBER
	Account type:	Checking	Savings
Routing Number Account Number			
This authority is to remain in full force and effect until First & Central Presbyterian Church receives we such and time and manner as to afford First & Central and my (our) financial institution	itten notification fro n a reasonable oppor	tunity to act on it.	
Your name (please print) Your signature	1	Date:	<u></u>
Please debit (withdraw) \$ from my (our) account on the 15th day of each month (or on	the next business da	y if the 15th is not a	business day).
Debit Authorization: I (we) hereby authorize First & Central Presbyterian Church to initiate debit of account indicated below and the financial institution named below to debit the same to such account. <u>I</u> that the origination of ACH transactions to my (our) account must comply with the provisions of the transactions to my (our) account must comply with the provisions of the transactions to my (our) account must comply with the provisions of the transactions to my (our) account must comply with the provisions of the transactions to my (our) account must comply with the provisions of the transactions to my (our) account must comply with the provisions of the transactions to my (our) account must comply with the provisions of the transactions to my (our) account must comply with the provisions of the transactions to my (our) account must comply with the provisions of the transactions to my (our) account must comply with the provisions of the transactions to my (our) account must comply with the provisions of the transactions to my (our) account must comply with the provisions of the transactions to my (our) account must comply with the provisions of the transactions to my (our) account must comply with the provisions of the transactions to my (our) account my	(we) acknowledge	VOUB AANS VOUB AANS Anywhere, Girl Goodo RY TO THE OBJER COM 	DATE \$ DOLLARS
Financial Institution Name		ROUTING ACCOUNT NUMBER NUMBER	CHECK NUMBER
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This authority is to remain in full force and effect until First & Central Presbyterian Church receives wr such and time and manner as to afford First & Central and my (our) financial institution			ermination at
Your name (please print) Your signature		Date:	
Your name (please print) Your signature Please debit (withdraw) \$ from my (our) account on the 15th day of each month (or on			hugingga daw)
Debit Authorization: I (we) hereby authorize First & Central Presbyterian Church to initiate debit e account indicated below and the financial institution named below to debit the same to such account. <u>I</u> <u>that the origination of ACH transactions to my (our) account must comply with the provisions of</u>	entries to my (our) (we) acknowledge	YD/07 NAME YD/07 NAME YD/07 NAME YD/07 NAME Amywhen, OK 00000 PAY TD THE OBJER CE	DATE
Financial Institution Name		ROUTING ACCOUNT NUMBER NUMBER	CHECK NUMBER
Routing Number Account Number	Account type:	Checking	Savings
This authority is to remain in full force and effect until First & Central Presbyterian Church receives we such and time and manner as to afford First & Central and my (our) financial institution			ermination at
		Date:	
Your name (please print) Your signature			
Please debit (withdraw) \$ from my (our) account on the 15th day of each month (or on	the next business day	y if the 15th is not a	business day).