## Application and Authorization For Automatic Electronic Payment of Tithes and Offerings The Falls Church Anglican

Please print legibly

Company Name:	The Church at The Falls — The Falls Church 6565 Arlington Blvd, Suite 300, Falls Church, VA 22042-3000
Federal ID Number	: 47-1006296
entries to the check DEPOSITORY, to de Automated Clearing	orize The Falls Church Anglican, hereinafter called COMPANY, to initiate regularly scheduled debit king account indicated below. I (We) hereby authorize the depository named below, hereinafter calle be bit the same entries to the checking account indicated below. I (We) agree to be bound by the g House (ACH) operating rules which govern these entries, as in effect from time to time, and no entries may be initiated that violate laws of the United States.
Name(s)	
Phone	E-mail
Bank/Depository I	Name
City/State	
Bank Routing Nur	mber
Checking Account	Number
Amount to be deb	pited to my (our) checking account each month: \$
Apply gift to: $\Box$	Operating Fund   Onward (Building Fund)
_	this method of contributing to The Falls Church Anglican is not available to any other funds Please see our online giving options on www.tfcanglican.org
Requested transa	ction date:
	$1_{st}$ $\square 2_{nd}$ $\square 3_{rd}$ Tuesday of the month or next business day
	rity is to remain in full force and effect until COMPANY receives <b>written notification</b> from me (or lating such authority and in such manner as to afford COMPANY a reasonable opportunity to act on it
Signed	Date
Sianed	Date

Please mail form to The Falls Church Anglican, Attn: Comptroller 6565 Arlington Boulevard, Suite 300 Falls Church, VA 22042