



ST. PAUL'S
EPISCOPAL CHURCH
RIVERSIDE

**Electronic Funds Transfer and
Reoccurring Credit Card Form
2020/21**

DONOR INFORMATION

Printed Name(s): _____

Signature(s): _____

Address: _____

Telephone Number _____

E-mail Address: _____

Effective Date: _____

New Checking Account *(a copy of a voided check is recommended for processing)*

Routing Number: _____

Account Number: _____

One Time Transaction: _____ or Reoccurring Transaction _____

Debit Date: 5th of the month _____ or 20th of the month _____

Notes: _____

Reoccurring Credit Card Form

Name on Credit Card: _____

Credit Card Number: _____

Expiration Date: _____ Security Code: _____

Monthly Donation Amount: _____

Donors: please return a completed copy of this form to Tanya Barrera, Bookkeeper, St. Paul's Episcopal Church, at the address below:

200 Riverside Avenue • Riverside, Connecticut 06878
Tel (203) 637-2447
tanya.barrera@stpaulsriverside.org