

**Please return this form to:**

Virginia Mennonite Missions

601 Parkwood Drive

Harrisonburg, VA 22802

**Direct Payment Authorization**

I hereby authorize Park View Federal Credit Union, on behalf of Virginia Mennonite Missions *(VMMissions)*, to initiate debit entries to my account at the financial institution listed below:

Account Holder Name Street Address City, State Zip

Financial Institution Name \_\_\_\_ Savings

\_\_\_\_ Checking

Routing & Transit Number Account Number

**Other Project** (please specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_/month

**General Mission Fund** $\_\_\_\_\_\_\_\_\_/month

**Other Project** (please specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_ /month

**Please attach a voided check** or financial institution account verification letter to this form.

**Note:** *Park View Federal Credit Union accounts do NOT need to provide a voided check. All others do.*

**I understand that this transaction will occur on the 10th of each month**. Should the 10th of the month fall on a weekend or Federal holiday, the debit shall occur on the following bank date.

**Month/Year to start: \_\_\_\_\_\_\_\_\_**

**Monthly Amount to debit \_\_\_\_\_\_\_\_\_\_**

***Fee for rejected transaction $ 30 (e.g., insufficient funds, closed account)***

**PLEASE NOTE:** *This authorization shall remain in effect until VMMissions has received notification of termination* ***from me in writing*** *– giving VMMissions sufficient time to discontinue transfer.*

**Contribution Receipts for all transactions will be generated at the end of the year**

**Signature**

Authorized by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  *(Signature)*

Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Contact:** (540) 434-9727

Email: [info@vmmissions.org](mailto:info@vmmissions.org)

Web: [**vmmissions.org**](http://www.vmmissions.org)