



## Missionary Gospel Fellowship

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Fax: (209) 634-8576 Email: [mgfhq@mgfhq.org](mailto:mgfhq@mgfhq.org)

Greetings our faithful MGF donors,

We offer the option of **automatic withdrawals** from your personal account & into our Missionary Gospel Fellowship account. **This option of processing your donated funds is totally optional; the current way of receiving & processing your donations will continue.** However, if this automatic, electronic option would be of use to you, please fill out the attached authorization form, include a voided check, & mail it all back to our office here in Turlock. We certainly want to assist you in your faithful financial support of your designated MGF missionary.

On the 8<sup>th</sup> & 22<sup>nd</sup> of each month, our office will electronically initiate a withdrawal from your account. You will be asked to select one of these days as your processing day. The system will be set up with the assumption that you will be giving the same donation amount each & every month. Any deviation from this arrangement would have to be communicated to us in writing prior to the two processing dates.

Hopefully, this picture of a check below will help you fill out the required information on the enclosed Authorization Form.

3

NAME OF DEPOSITOR  
STREET ADDRESS  
CITY, STATE

101

19

PAY TO THE  
ORDER OF: \_\_\_\_\_ \$

\_\_\_\_\_ DOLLARS

4 → NAME OF YOUR BANK

5 → Payable Through Another Bank

For \_\_\_\_\_

0210010826 123 456 789 0101

ROUTING NUMBER 1      ACCOUNT NUMBER 2      CHECK NUMBER



# AUTHORIZATION FOR AUTOMATIC DONATION WITHDRAWAL

I authorize **Missionary Gospel Fellowship** to automatically withdraw a designated donation amount from my personal account into an account held by Missionary Gospel Fellowship. I understand that any authorized transfer of funds into the MGF account will be processed through the **Automated Clearing House System (ACH)** as set up through the supervision of **Farmer & Merchant Bank**, the long-time bank of MGF. These withdrawals of funds will be processed on the 8<sup>th</sup> or the 22<sup>nd</sup> of each month. If these dates fall on a day when the bank & the ACH are not open, the withdrawals will be processed on the next business day.

1	Donor Name: _____ <i>(If joint account, need one name as appears on your checks)</i>
2	Account Number: _____
3	Checking: <input type="checkbox"/> Savings: <input type="checkbox"/>
4	Routing Number: _____

This authorization will remain in effect until I give written notice to the contrary, and have allowed reasonable time for action on the notice. The start date will begin upon approval of MGF's bank.

5	Name of missionary you support: _____
6	Missionary's project number: _____ Monthly \$\$: _____
7	Choose the day of the month for processing: <input type="checkbox"/> 8 <sup>th</sup> <input type="checkbox"/> 22 <sup>nd</sup>
8	<b>Donor Signature:</b> _____ <i>(If a joint account, only one signature required Same name as on line 1 above)</i>
9	E-Mail Address (For receipting purposes): _____ <small>(Optional information)</small>

Place your voided check here  
as you fold this form.