

***First Reformed Church***  
**Request for CHANGE or ADDITION**  
**in Electronic Contribution Plan**

**Beginning Date for Requested Change in Contribution:**

**New Amount of Contribution**

\_\_\_\_\_ General Fund - Weekly  
\_\_\_\_\_ General Fund - 2nd of month  
\_\_\_\_\_ General Fund - 2nd & 16th of month  
\_\_\_\_\_ Capital Improvements Fund (1st Monday of month)  
\_\_\_\_\_ Building Debt Reduction Fund (1st Monday of month)  
\_\_\_\_\_ Monthly Special Offering (16th of month)

**TO: First Reformed Church**

I authorize you to change my electronic contribution plan offerings. I request that this contribution be withdrawn on the scheduled dates and for the amount(s) as authorized above.

\_\_\_\_\_ **Name (Please Print)**

\_\_\_\_\_ **Signature**

**ATTACH VOIDED CHECK ONLY IF BANKING**  
**ACCOUNT IS CHANGED**  
**For Savings Account-attach a Savings Deposit Slip**  
**Here ONLY if account is changed**

Please contact Lisa in the church office with any questions.