



Be A Sustaining Supporter of Cursillo - It's as Easy as 1-2-3!

Electronic Bank Services Form for Credit to the Duvall Cursillo Fund

1. AUTHORIZE

I/We authorize the Episcopal Diocese of the Central Gulf Coast, Inc. (the Diocese), to initiate DEBIT entries to my/our Banking/Credit Union Account for the depository financial institution shown (called the Depository) in the attached voided check and to DEBIT that account in the amount of \$_____ per month on the 1st / 15th (circle one) day of the month. This authorization will remain in effect until the Diocese has received written notification from me/us that we terminate this authority, giving the Diocese and Depository a reasonable opportunity to respond.

2. ATTACHED

To assure accuracy please attach a voided check.

3. SIGN

Please complete and sign below. Date _____

Name(s) _____

Signed _____

Address _____

Telephone number _____

Please mail completed form, with voided check attached, to the following address: **EPISCOPAL DIOCESE OF THE CENTRAL GULF COAST
DUVAL CURSILLO FUND
P.O. Box 13330 • Pensacola, FL 32591-3330**