



## Auto Tithe Plan Change

**PLEASE COMPLETE THE FOLLOWING:**

*Please print clearly*

**Name:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Email:** \_\_\_\_\_

I would like to **INCREASE** FROM \$\_\_\_\_\_ to \$\_\_\_\_\_

I would like to **DECREASE** FROM \$\_\_\_\_\_ to \$\_\_\_\_\_

I would like to update my **ADDRESS (please provide BILLING address below)**

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Street	City	State	Zip
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I would like to change my **CREDIT/DEBIT CARD**

New Card Type \_\_\_\_\_ Number: \_\_\_\_\_ Exp Date \_\_\_\_\_

I would like to change my **BANK DEBIT ACCOUNT** Note: Must attach VOIDED CHECK

Account Number: \_\_\_\_\_ BANK: \_\_\_\_\_

Routing Number: \_\_\_\_\_

I would like to **CANCEL** my Auto Tithe plan, effective five (5) business days from today

Reason for Cancellation (Circle one): Financial Difficulties      Relocation

Other \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Please send your completed form to

**Email: [autotithe@agapelive.com](mailto:autotithe@agapelive.com) Mail: Agape AutoTithe**

**8444 Wilshire Blvd. 2<sup>nd</sup> Floor**

**Beverly Hills, CA 90211**