

Authorization Agreement for Payment of Tithes to General Fund Automated Clearing House Transactions (ACH Debits)

| ACH Authorization | | |
|--|------------------------------|--|
| | ☐ ADD – Debit the account sl | hown. |
| CHECK ONE: | ☐ CHANGE – Change financ | ial institutions, account number and/or amount |
| | ☐ REVOKE – Terminate the | authorization currently in force |
| I (we) hereby authorize: La Crescent United Methodist Church hereinafter called CHURCH, to initiate debit entries and to initiate, if necessary, credit entries and adjustments for any debit entries in error to my (our) account as indicated below and the depository named below, hereinafter called DEPOSITORY, to debit and/or credit the same to such account. | | |
| Bank Information | | |
| DEPOSITORY NAME: | | Branch: (if applicable) |
| City, State, ZIP: | | Checking Savings account (select one) |
| Routing #: | | Account #: |
| I (we) wish for this transaction to start on: in the amount of: \$ | | |
| and to recur on the: \Box 1st of the month \Box 15th of the month \Box 1st & 15th of the month | | |
| PLEASE ATTACH VOIDED CHECK | | |
| I (we) understand that this authorization will remain in full force and effect until I (we) notify in writing that I (we) wish to revoke this authorization in such time and in such manner as to afford CHURCH and DEPOSITORY a reasonable opportunity to act on it. | | |
| Name(s): Please print | | |
| | | |
| Signature(s) | | Date |

NOTE: Written credit and debit authorizations must provide that the receiver may revoke the authorization only by notifying the originator in the manner specified in the authorization.