



Remembrance Church

Experience | Connect | Grow | Serve

AUTHORIZATION AGREEMENT FOR DIRECT GIVING (ELECTRONIC FUNDS TRANSFER—DEBIT ENTRIES)

I (we) hereby authorize **Remembrance Church**, hereinafter called COMPANY, to initiate debit entries to my (our) Checking Savings account (select one) indicated below at the depository financial institution named below, hereinafter called DEPOSITORY, to debit same to such account. I (we) acknowledge that the origination of EFT transactions to my (our) account must comply with the provisions of U. S. law.

NOTE: PLEASE INCLUDE VOIDED CHECK

DEPOSITORY NAME _____

CITY _____ STATE _____ ZIP _____

ROUTING TRANSIT/ABA NO. _____ ACCOUNT NO. _____

CONTRIBUTION DOLLAR AMOUNT		
\$ _____		
General Fund		
<u>FREQUENCY—PLEASE CIRCLE ONE</u>		
WEEKLY Friday of each week	SEMI-MONTHLY 15th & Last Day of the Month	MONTHLY 15th of the Month
FIRST CONTRIBUTION MONTH: _____		
<p>NOTE: If the 15th falls on a holiday or a weekend, the transaction will take place on the first business day after the 15th.</p>		

This authority is to remain in full force and effect until COMPANY has received written notification from me (or either of us) of its termination in such time and in such manner as to afford COMPANY and DEPOSITORY a reasonable opportunity to act on it.

NAME(S) _____ DATE: _____
(Please print)

SIGNED _____

NOTE: WRITTEN DEBIT AUTHORIZATIONS MUST PROVIDE THAT THE RECEIVER MAY REVOKE THE AUTHORIZATION ONLY BY NOTIFYING THE ORIGINATOR IN THE MANNER SPECIFIED IN THE AUTHORIZATION.