

AUTHORIZATION AGREEMENT FOR DIRECT PAYMENTS (ACH DEBITS)

I (we) hereby authorize Rolling Hills Baptist Church ("Company"), to initiate debit entries to transfer funds from my (our): Select One

Checking Savings

account indicated below at the depository financial institution named below, ("Depository"). I (we) agree tht ACH transactions authorized herein shall comply with all applicable U.S. law.

AMOUNT \$ _____

Choose the frequency that you would like the amount to be debited from your account:

Weekly Bi-Weekly Monthly

This authorization is to remain in full force and effect until Company has received written notification from me (or any authorized account signer) of its termination in such time and manner as to afford the Company and Financial Institution a reasonable opportunity to act on the request.

DEPOSITORY NAME _____

ROUTING NUMBER _____

ACCOUNT NUMBER _____

The written notification (email or fax) must be received at least 3 days before the file is processed.

Any changes to the agreement - i.e. amount or bank account information must be received by Company at least 3 days before the file is processed.

Name (s) (print) _____

Date: _____

Signature: _____

Please attach a Voided Check