

# ACH AUTHORIZATION AGREEMENT FOR DIRECT PAYMENTS TO NORTHAVEN UNITED METHODIST CHURCH

I (we) hereby authorize Northaven United Methodist Church (NUMC) to initiate ACH debit entries to my (our) \_\_\_ Checking / \_\_\_ Savings Account (select one) indicated below at the depository institution (your financial institution) named below, hereinafter called DEPOSITORY, and to debit the same such account. I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of U.S. law.

Depository Name \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Routing Number \_\_\_\_\_ Account Number \_\_\_\_\_

Please attach a voided check; do not attach a deposit slip.

### PAYMENT INSTRUCTIONS

<input type="checkbox"/> 15 <sup>th</sup> of Each Month \$ _____	Operating Fund _____ \$ _____ Human Development _____ \$ _____  and/or Building Fund _____ \$ _____ Other _____ \$ _____
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<input type="checkbox"/> 30 <sup>th</sup> of Each Month \$ _____	Operating Fund _____ \$ _____ Human Development _____ \$ _____ Building Fund _____ \$ _____ Other _____ \$ _____
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You have the option making your payments twice a month or once a month. Check either or both the 15<sup>th</sup> or 30<sup>th</sup>. Enter the amount of the debit for each date. Enter the fund allocations, ensuring the total dollars equal the debit total for the date. If the date falls on a weekend or holiday, the debit will be processed on the next bank business day.

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

Name(s) \_\_\_\_\_ Address \_\_\_\_\_  
(Please Print)

City \_\_\_\_\_ State \_\_\_\_\_

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

**Make a copy of this authorization for your records.**