AUTHORIZATION AGREEMENT FOR ACH DEBITS

FROM

Plymouth Alliance Church

Individual/Family Name:

I (we) hereby authorize **Plymouth Alliance Church**, hereinafter called PAC, to initiate debit entries to my (our) [ ] Checking/[ ] Savings Account (select one) indicated below at the depository financial institution named below, hereafter called DEPOSITORY, and debit the same to such account. I (we) acknowledge that the origination of ACH transaction to my (our) account must comply with the provisions of U.S. law.

Depository Name:

City:        State:        Zip:

Routing Number:        Account Number:

The amount authorized for debit from DEPOSITORY shall be: $

The amount listed above will be dispersed among the following categories:

General Fund:                      Great Commission Fund:

Other(please specify):                      Other(please specify):

Other(please specify):                      Other(please specify):

I (we) understand that the debit entries will be made the first business day following the first Sunday of each month.

This authorization is to remain in full force and effect until PAC has received **written notification** from me of its termination in such time and in such manner as to afford PAC and DEPOSITORY a reasonable opportunity to act on it.

Name:        Name:

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

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