



- New**
- Change/Update**

AUTHORIZATION AGREEMENT FOR SECURE AUTOMATIC DEDUCTIONS

I (we) hereby authorize Ebenezer Baptist Church (church) to initiate debit entries to my (our) account, at the depository financial institution named below (depository) or debit/credit card; and to debit the same to such account as I (we) have specified.

ACCOUNT

Provide either checking/savings or debit/credit card information

Checking/Savings Account

Name(s) on Account _____

Routing# _____

Account# _____

Account type (circle one) Checking Saving

Debit/Credit Card (Visa, MasterCard)

Name on Card _____

Credit Card# _____

Expiration MM/YY CVV Code Billing Zip Code

_____ _____ _____

AUTHORIZATION

Amount (each time the deduction is taken): \$ _____

Fund (circle ONLY ONE): TITHE InAsMuch Principal Reduction

Period (check ONLY ONE option below and enter the desired day(s) of the month for deduction)

- Weekly on each Sunday
- Twice Monthly on the: _____ and _____ day of the month
- Monthly on the: _____ day of the month

Authorization to begin on (date): _____

Authorization to end on (date): _____

This authorization is to remain in effect until the Church receives written notification from me (us) of its change or termination. Requests to change a deduction, skip a scheduled deduction, or terminate the deduction schedule must be received in writing by the church accountant at least 5 business days prior to the deduction date to ensure that the change can be transmitted prior to the deduction date. At the time of deductions, a confirmation email will be sent to the email address specified.

Name(s) please print _____

Signature _____

Email _____ Phone _____

Date _____