

AUTHORIZATION AGREEMENT FOR DIRECT PAYMENTS (ACH DEBITS)
St. John's Lutheran Church, Buffalo, Minnesota

I (we) hereby authorize St. John's Lutheran Church, Buffalo, Minnesota, hereinafter called COMPANY, to initiate debit entries to my (our) account at the depository financial institution named below, hereinafter called DEPOSITORY, and to debit the same to such account. I (we) acknowledge the origination of ACH transactions to my (our) account must comply with the provisions of U. S. law and governed by rules of the Automated Clearing House Association.

Depository Name _____ Branch _____

City _____ State _____ Zip _____

Routing Number _____ Account Number _____

Checking account or Savings account (select one)

MONTHLY Transfer Amount \$ _____

To be distributed to the following funds: General \$ _____

Building \$ _____

Other \$ _____ (specify) _____

I (we) understand that transfers will be debited from my (our) account on the **10th of each month.**

Date of first transfer _____

I (We) authorize the depository to transfer funds as described. I (We) agree to maintain sufficient balances to cover such transfers. I (We) agree that the rights of the depository with respect to each transfer shall be the same as if it were a withdrawal personally signed by me (us). This authorization shall remain in full force and effect until St. John's Lutheran Church 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.

Date: _____

Account Holder Name (print) _____ Signature: _____

Account Holder Name (print) _____ Signature: _____

I (we) hereby **amend** the Transfer Amount of this Authorization to \$ _____ per month

beginning the 10th of _____, 20_____.

Date: _____

Account Holder Name (print) _____ Signature: _____

Account Holder Name (print) _____ Signature: _____

I (we) hereby **cancel** this Authorization for Automatic transfer.

Date: _____

Account Holder Name (print) _____ Signature: _____

Account Holder Name (print) _____ Signature: _____