

**AUTHORIZATION AGREEMENT FOR AUTOMATIC TRANSFERS FROM CHURCH MEMBER
ACCOUNT TO THE CHURCH ACCOUNT (ACH DEBITS)**

New _____ Change _____ Delete _____

Church Name _____ Date _____

I (We) hereby authorize _____ United Methodist Church, hereinafter called CHURCH, to initiate, through the Virginia United Methodist Credit Union, Inc., debit entries and, if necessary, debit/credit correction and adjustment entries to my (our) ___ Checking Account / ___ Savings Account (select one) indicated below at the depository financial institution named below, hereafter called FINANCIAL INSTITUTION. I (We) acknowledge that the origination of ACH transactions to/from my (our) account must comply with the provisions of U.S. law.

Financial Institution Name _____ Branch _____

City _____ State _____ Zip _____ Phone # _____

Routing Number _____ Account Number _____

Total Transfer Authorized \$ _____

Transfer date(s) and amount for each date: 15th \$ _____

30th \$ _____

Start Date _____

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

Name _____ SS # _____
Please Print

Signature _____ Phone # _____

Name _____ SS # _____
Please Print

Signature _____

Date _____

PLEASE ATTACH COPY OF VOIDED CHECK TO THIS FORM

**This form can be faxed or mailed to the VUMCU at 804-672-0444
PO Box 9798
Henrico, VA 23228**

The church is required to keep a copy of this form and the voided check on file.