

AUTHORIZATION AGREEMENT FOR DIRECT DEBIT  
COLLEGE HILL PRESBYTERIAN CHURCH

I (we) hereby authorize COLLEGE HILL PRESBYTERIAN CHURCH, hereinafter called ORGANIZATION, to initiate debit entries to my (our) checking account indicated below and the financial institution named below, hereinafter called FINANCIAL INSTITUTION, to debit same to such account.

Financial Institution Name \_\_\_\_\_ Branch \_\_\_\_\_

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

Routing Number. \_\_\_\_\_ (see below)

Checking Account Number \_\_\_\_\_

My/(Our) gift to be paid \$ \_\_\_\_\_ monthly on the 5<sup>th</sup> of each month,

or \$ \_\_\_\_\_ to be paid 2 times per month on the 5<sup>th</sup> and 20<sup>th</sup> of each month.

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

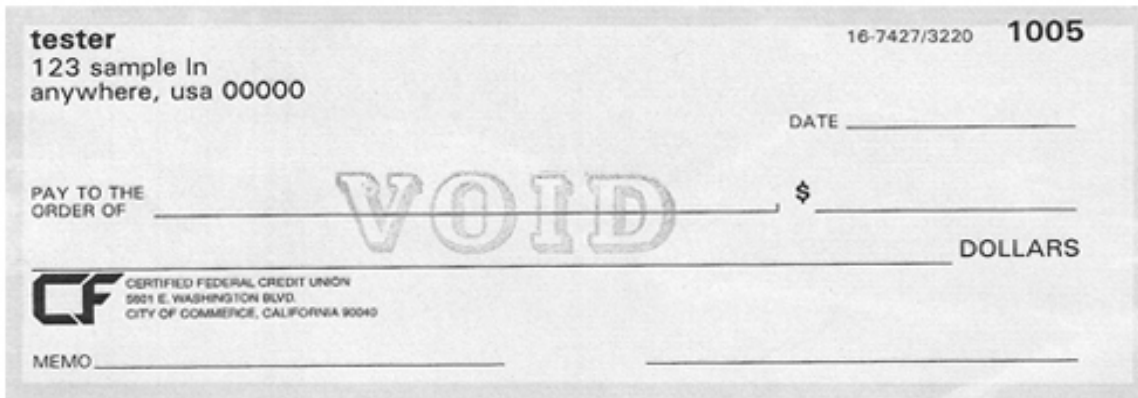
\_\_\_\_\_  
Print Individual Name(s) (as contributions are to be recorded by CHPC)

Signature(s) \_\_\_\_\_

Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

House Phone: \_\_\_\_\_ WorkPhone: \_\_\_\_\_ Date: \_\_\_\_\_

PLEASE ATTACH COPY OF VOIDED CHECK OVER THE IMAGE BELOW



⑆ 3 2 2 0 7 4 2 7 7 ⑆

ROUTING NUMBER

⑆ 2 3 4 5 6 ⑆ 1 0 0 5

CHECKING ACCOUNT