

# Monthly Direct Debit Form for Church Year \_\_\_\_\_

## Authorization Agreement for Automatic Debits (Electronic Funds Transfer)

**\*\*Complete this if you are a new direct debit donor or if you have a new account\*\***

Organization Name: Prairie Circle Unitarian Universalist Congregation

I (we) hereby authorize Prairie Circle Unitarian Universalist Congregation, hereinafter called COMPANY, to initiate debit entries and if necessary, credit entries and adjustments for any debit entries in error to my/our account indicated below for payment of \$ \_\_\_\_\_ PER MONTH, and the depository named below, hereinafter called DEPOSITORY, to debit and/or credit the same to such amount. This is to begin \_\_\_\_\_, 20\_\_\_\_ and end \_\_\_\_\_, 20\_\_\_\_\_.

DEPOSITORY Name \_\_\_\_\_

Account Type:  Checking or  Savings

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

Transit/ABA No. \_\_\_\_\_ Account No. \_\_\_\_\_

This authority is to remain in full force and effect until the COMPANY 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.

Name(s) \_\_\_\_\_ (Please Print)

Name(s) \_\_\_\_\_ (Please Print)

Date \_\_\_\_\_ Signed \_\_\_\_\_

Date \_\_\_\_\_ Signed \_\_\_\_\_

**New Automatic Debits** - Please attach a **Voided** check or deposit slip for Checking or Savings Accounts below along with this form.

Note: The COMPANY shall retain these authorizations (or a reasonable facsimile of the original) for a period no less than 2 years after the revocation or cessation of the authorization.

Attach VOIDED check or deposit slip here
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