Direct Draft Form



DRAFT AUTHORIZATION AGREEMENT FOR PRE-AUTHORIZED PAYMENTS (ACH DEBITS)

Originating Company: First United Methodist Church

I authorize the above named Originating Company to initiate entries to the account indicated below as follows:

- 1) They may initiate DEBIT entries, which removes money from my account, for payment of my authorized monthly pledge, according to the schedule and other conditions to which the Originating Company and I have agreed.
- 2) They may initiate CREDIT entries to reverse any transactions they have originated to my account in error.

Name					
Account Number _			□	Checking	Savings
Name of Depositor	ry Financial Ins	stitution			
Location of Depository Financial Institution:					
City:		State	:		Zip:
Drafts will take place on the 15 th of each month, beginning on October 15, 2022.					
Amount to be drafted per month (circle one):					
	\$16.10	\$32.20	\$48.30	Other: \$	
Attach VOIDED CHECK here. DO NOT USE A DEPOSIT SLIP as it may not contain the necessary account and routing numbers to complete your draft.					
This authority is to remain in effect until the Originator has received written notification of its termination and has had a reasonable opportunity to act upon it. You may change the amount of your monthly pledge by completely a new pledge card each year.					
Date		_ Signed			