

AUTHORIZATION FOR DIRECT PAYMENT VIA ACH (ACH DEBITS)

Direct Payment via ACH is the transfer of funds from a consumer account for the purpose of making a payment.

I/We hereby authorize First United Methodist Church, Prairie Grove, AR, to electronically debit my/our account (and if necessary, to electronically credit my/our account to correct erroneous debits).

___ Checking Account OR ___ Savings Account at the depository financial institution named below. I/We agree that ACH transactions I/we authorize comply with all applicable law.

Depository Name _____ Routing Number _____

Account Number _____ Name(s) on Account _____

Amount of debit(s) authorized: _____ General Operating Contribution (Arvest Bank)

_____ Building Contribution (Bank of Fayetteville)

Date(s) and/or frequency of debit(s) _____

I/We understand that this authorization will remain in full force and effect until I/we notify First United Methodist Church, Prairie Grove, AR, in writing, at 1401 E. Parks Street, Prairie Grove, AR 72753, that I/we wish to revoke this authorization. I/We understand that First United Methodist Church, Prairie Grove, AR, requires at least two (2) weeks prior notice in order to cancel this authorization.

Name(s) (Please print) _____

Signature

Signature

Date _____