

**NORTHMINSTER PRESBYTERIAN CHURCH
ACH DEBIT AUTHORIZATION AGREEMENT**

AUTHORIZATION AGREEMENT FOR DIRECT PAYMENTS (ACH DEBITS)

Company: *Northminster Presbyterian Church* (herein referred to as "Company")

Address: 2515 Central Park Avenue, Evanston, IL 60201

I (we) hereby authorize Company to initiate debit entries from my (our):

_____ Checking Account

_____ Savings Account

Please debit my (our) account for: _____ (enter dollar amount and frequency, for example, \$500 per month) indicated below at the depository financial institution named below, hereinafter called Depository, and to debit the same to such account. I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with the provision of U.S. law. **We strongly encourage members to authorize monthly payments.**

Depository Name _____ Branch _____

City _____ State _____ Zip _____

Routing Number (number located on the lower left hand corner of your check) _____

Account Number _____

This authorization is to remain in full force and effect until 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.

Depositor Name(s) _____

Email Address _____

Telephone Number _____

Signature _____ Date _____

Signature _____ Date _____

NOTE: ALL WRITTEN DEBIT AUTHORIZATIONS MUST PROVIDE THAT THE RECEIVER MAY REVOKE THE AUTHORIZATION ONLY BY NOTIFYING THE ORIGINATOR IN THE MANNER SPECIFIED IN THE AUTHORIZATION.

Account holder is required to verify bank account data and attach a voided check here:

Please return the completed form to Bob Regan c/o Northminster Presbyterian Church, 2515 Central Park Avenue, Evanston, IL 60201. If you have any questions, please contact Bob Regan at 630-227-2050 (office), 847-675-6465 (home), or 630-890-8101 (cell). E-mail address is rregan@aarcorp.com. Thank you for your participation.