



LAUMC

Los Altos United Methodist Church / 655 Magdalena Avenue / Los Altos, CA 94024-5297

PHONE 650-948-1083 / FAX 650-949-5372 / WEB WWW.laumc.org

AUTHORIZATION AGREEMENT FOR MONTHLY DIRECT PAYMENTS (ACH DEBITS)

I (we) hereby authorize United Methodist Church of Los Altos (LAUMC) to initiate debit entries to my (our) account indicated below and the Financial Institution named below, hereinafter called FINANCIAL INSTITUTION, to debit same to such account. I (we) acknowledge the origination of ACH transactions to my (our) account must comply with the provisions of U.S. Law.

(Name of Financial Institution)

(Routing/Transit Number)

(Account Number)

Type of Account (check one): Checking Savings

Amount to Debit: \$ _____ Transactions will occur once per month on the first Monday of the month.

This agreement is not in effect until I receive a confirmation letter from LAUMC.

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

(Print individual name)

(Print individual name)

(Print email address)

(Print email address)

(Signature)

(Date)

(Signature)

(Date)

***PLEASE ATTACH VOIDED CHECK (for checking accounts) or DEPOSIT SLIP (for savings accounts) FROM THE ABOVE REFERENCED ACCOUNT.**