Sunset Church of Christ Electronic Payment Authorization Form "Draft Form"

Member Name:	
Bank Name:	
Bank ABA Routing Number:	
Bank Account Number:	
Checking Savings	
Please check one: Regular Contribution OR	Debt Retirement
Amount to be paid: \$	
Please Check Frequency of payment:	
A bi-monthly draft on the 5th AND 20th	
A monthly draft on the 5 th OR 20 th (These are your only	(circle one) y two options)
I hereby authorize Sunset Church of Christ, herein after referred to as "ch payments agreed to by me and, if necessary, credit entries and adjustmenteror. Church shall debit the payments from the financial institution and a if I fail to provide complete and accurate information on this authorization delayed or my payments may be erroneously transferred electronically.	nts for any amounts debited electronically in ccount designated above. I recognize that
I consent to and agree to comply with the National Automated Clearing Heabout electronic transfers as they exist on the date of my signature on this amended, or repealed.	
Member Printed Name	
Member Signature	

Please attach a voided check (not deposit slip) or savings withdrawal slip.

Please return to the church office in a sealed envelope.