

## Electronic Funds Transfer

This is my authorization to Benson Memorial United Methodist Church for the following recurring draft to be made from my ( Checking Account  Savings Account) on the following basis effective January 2021.

Applied to the General Fund in the amount indicated:

\$\_\_\_\_\_  Weekly  Monthly on the 1st  Monthly on the 15th

Applied to designated funds in the amount indicated:

\$\_\_\_\_\_  Weekly  Monthly on the 1st  Monthly on the 15th

Name of Designated Fund \_\_\_\_\_

*I understand that this authorization will be in effect until I give written notification to Benson Memorial UMC and my financial institution that I no longer desire this service, allowing reasonable time to terminate the authorization. I also understand that if corrections or changes in the debit amount are necessary it may involve an adjustment (credit or debit) to my account. I also understand that I have the opportunity to make changes to my draft contributions at any time. This authorization is non-negotiable and non-transferable.*

Name (Print): \_\_\_\_\_ Signature and Date: \_\_\_\_\_

*\*Attach a voided check for the account from which withdrawals will be made.*