**Lakeshore Congregational Methodist Church**

**AUTHORIZATION AGREEMENT FOR AUTOMATIC PAYMENTS**

NAME:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PHONE:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADDRESS:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_CITY:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ZIP:\_\_\_\_\_\_\_\_\_\_\_\_\_\_

FINANCIAL INSTITUTION NAME:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_BRANCH:\_\_\_\_\_\_\_\_\_\_\_\_

CITY:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_STATE:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ZIP:\_\_\_\_\_\_\_\_\_\_\_\_\_\_

TRANSIT/ABA#\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_CHECKING ACCOUNT #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I hereby authorize the Financial Institution named above to pay my monthly contribution in the amount of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_to:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_General Fund

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Building Fund

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Other (Please designate)

by charging each payment to my account and to make that deduction payable to the order of Lakeshore Congregational Methodist Church. I agree that each payment shall be the same as if it were an instrument personally signed by me. This authority is to remain in effect until revoked by me in writing. In addition, I have the right to stop payment of a charge by timely notification to my Financial Institution prior to charging my account. I understand, however, that both the Financial Institution and Lakeshore Congregational Methodist Church reserve the right to terminate this payment plan (or my participation therein).

I prefer this transaction to occur on the \_\_1st  , \_\_15th  , or both of those days of each month. Please circle your choice.

DATE:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_SIGNATURE:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NOTE: Please return this authorization and a VOIDED check on your account to:

Lakeshore Church

6880 Siwell Road

Byram, MS 39272

Attn: Jennifer Smith