

Attention: Jamie Ford, Executive Director of Church Operations

Authorization Agreement for Automatic Deductions Via ACH Transfers

This voluntary program is for your convenience only.

This form is not required to make or pay a pledge.

Member Name(s)			
Address			
City	State	Zip	
I/We hereby authorize Flossmoor Common following regular debits (deductions) from the following regular debits (deductions) from the following debt was pleaded from the following from	om the below named be l cancelled by phone or re four business days to	ank and customer a letter notification t	ccount. This
Please deduct my pledge from the fol	J		
Financial Institution			
City	State	Zip	
ABA/Routing Number (9 digits on botto	om of check)		
Account Number		_	
Initiate my regular pledge deduction	on the checked day (choose one)	
10 th day of the month (or closest	business day)		
Weekly, each Monday			
Signed		Date	