ST. MATTHEW LUTHERAN CHURCH
DEBIT AUTHORIZATION FORM

I (we) hereby authorize St. Matthew Lutheran Church hereinafter called "COMPANY", to initiate recurring electronic debit entries to my (our) account indicated below and the Financial Institution named below, hereinafter called "FINANCIAL INSTITUTION", to debit the same to such account for _____. I (we) acknowledge that ACH transactions I (we) authorize must comply with all applicable laws, including U.S. law. In the event of an erroneous or duplicate entry, I hereby authorize COMPANY to credit my account indicated below to correct any error made.

_____
Financial Institution Branch

_____
Address

_____
City/State/Zip

Routing Number: _____ Account Number: _____

Type of Account: Checking: [ ] Savings: [ ]

Dollar Amount of recurring debit: _____ Start Date: _____

Frequency: 15TH of the Month [ ]

If the debit is recurring and the date of the debit falls on a non-banking day, the debit may post to your account on the next banking day and will not post to your account prior to the authorized date.

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

_____
Print or Type Individual Name

_____
Signature

_____
Date

Please Attach Copy of a Voided Check to This Form