



FEDERATED CHURCH

224 N. Union Avenue, Fergus Falls, Minnesota 56537

AUTHORIZATION AGREEMENT FOR DIRECT PAYMENTS (ACH DEBITS)

I (We) hereby authorize the Federated Church to initiate debit entries to my (our) Checking Account as indicated below. I (We) acknowledge that the origination of ACH transactions to my (our) account must comply with provisions of the U. S. Law. "I (We) agree to be bound by the provision of the Nacha Operating Rules.

Bank Name _____ Bank Address _____

Bank Routing Number _____ Account Number _____

This authorization remains in full force and effect until Federated Church receives written notification from me (or either of us) of its termination in such a time and manner as to afford Federated Church and FM Bank a reasonable opportunity to act upon it.

Printed Name: _____ Signature: _____

Joint Owner (if applicable)

Printed Name: _____ Signature: _____

ACH debit to first occur in the month of _____, 2027

Regular debit(s) to be made on (check one) ____ 5th ____ 16th of each month by in the amount of \$ ____.

Please attach a voided check (not a deposit slip) to this form and return to the church office.



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