

## AUTHORIZATION AGREEMENT FOR DIRECT DEBIT

I (we) hereby authorize Gospel Volunteers, Inc., hereinafter called COMPANY, to initiate debit entries from my (our) \_\_\_\_ Checking \_\_\_\_ Savings account (select one) indicated below and the Bank named below, and to debit such account for the payment of \_\_\_\_\_.

BANK \_\_\_\_\_ LOCATION \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

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

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

I (We) understand that the BANK is not responsible for any errors made by the COMPANY and that the BANK can only initiate debit and credit entries based upon information given to it by the COMPANY. I agree that the BANK has no liability to me if it is unable to make any transfer because of an act of God, mechanical failure or any interruption in communications not within its control, or if sufficient funds are not given to it by the COMPANY in the amount of the required transfer.

NAME(S) \_\_\_\_\_

ADDRESS \_\_\_\_\_  
(please print)

E-Mail Address \_\_\_\_\_

DATE \_\_\_\_\_ SIGNED \_\_\_\_\_

SIGNED \_\_\_\_\_

**\* ATTACH A COPY OF A VOID CHECK HERE.**