

# Wanamaker Woods Church of the Nazarene

3501 SW Wanamaker Road, Topeka, KS 66614

785-273-2248

## Authorization for a Direct Payment by ACH

I hereby authorize **Wanamaker Woods Church of the Nazarene** to initiate reoccurring debit entries on my account as indicated below.

Bank Name: \_\_\_\_\_

Bank Routing Number or ABA: \_\_\_\_\_

Account Title: \_\_\_\_\_

Account Number: \_\_\_\_\_

Account Type: (Circle one)    Checking    Saving

Amount of Debit Entry: \$ \_\_\_\_\_ (Tithe)    Frequency of Payment: \_\_\_\_\_

Amount of Debit Entry: \$ \_\_\_\_\_ (Faith Promise)    Frequency of Payment: \_\_\_\_\_

Amount of Debit Entry: \$ \_\_\_\_\_ (Building)    Frequency of Payment: \_\_\_\_\_

Amount of Debit Entry: \$ \_\_\_\_\_ ( \_\_\_\_\_ )    Frequency of Payment: \_\_\_\_\_

Start Date: \_\_\_\_\_    End Date: \_\_\_\_\_

This authorization will remain in full force and effect until **Wanamaker Woods Church of the Nazarene** receives written notification to termination the service. **Wanamaker Woods Church of the Nazarene** must be given reasonable time to act on the request.

\_\_\_\_\_  
Name of Authorized Signer

\_\_\_\_\_  
Signature of Authorized Signer

\_\_\_\_\_  
Date

(Please return form to Joyce Terrill or put in drop box by her door opposite Pastor's office)

\*\*\*\*\*ATTACH A COPY OF THE CHECK WHEN POSSIBLE\*\*\*\*\*