AUTHORIZATION AGREEMENT
ACH PREAUTHORIZED PAYMENTS (DEBITS)

I hereby authorize Church of God International Offices, to initiate debit entries or such adjusting entries, either debit or credit which are necessary for corrections, to my Checking _____ Savings _____ account indicated below and the financial institution named below to credit (or debit) the same to such account.

FINANCIAL INSTITUTION NAME **CITY** **STATE**

TRANSIT/ROUTING NUMBER **ACCOUNT NUMBER**

I understand that this authorization will be in effect until I notify my financial institution in writing that I no longer desire this service, allowing it reasonable time to act on my notification. I also understand that if corrections in the debit amount are necessary, it may involve an adjustment (credit or debit) to my account.

I have the right to stop payment of a debit entry by notifying my financial institution before the account is charged. If an erroneous debit entry is charged against my account, I have the right to have the amount of the entry credited to my account by my financial institution. I agree to give my financial institution a written notice identifying the entry, stating that it is in error, and requesting credit back to my account. I will provide this written notice within 15 calendar days following the date on which I was sent a statement of my account or a written notice of such entry, or 45 days after posting, whichever occurs first.

CHURCH NAME **CHURCH FILE #**

Tax ID Number

SIGNATURE **DATE**

PRINT SIGNOR'S NAME

MAIL ORIGINAL SIGNED FORM TO:
CHURCH OF GOD INT OFFICES - BUSINESS & RECORDS DEPT
PO BOX 8006, CLEVELAND, TN 37320-8006