



15350 County Rd 44
Goshen, IN 46528

Authorization for ACH Debit

I (we) hereby authorize Benton Mennonite Church to initiate debit entries from my (our) account at the financial institution listed below:

Financial institution name _____

Routing / transit number _____

Account number _____

Type of account (check only one): _____ Checking / draft _____ Savings / share

Amount to debit monthly: \$ _____

Date for first debit: _____

Monthly recurrence (check only one): _____ 1st of month

_____ 15th of month

Fund designation (if blank, entire amount will go to General Offering):

General Offering: \$ _____

Sharing Fund: \$ _____

New Building Fund: \$ _____

I (we) understand that should the regularly scheduled debit date fall on a weekend or federal holiday, the debit shall occur on the following banking date.

This authority shall remain in effect until Benton Mennonite Church has received written notification from me (us) of its termination in such a time and in such a manner as to afford Benton Mennonite Church a reasonable opportunity to act on it.

Account holder signature _____

Date _____

Co-account holder signature _____

Date _____

Please attach a voided check or financial institution account verification letter to this form, and return to Jonny Gerig Meyer by mail (20711 County Rd 38, Goshen, IN 46526) or email (treasurer@bentonchurch.org).