

## Bank Transfer Authorization Form

I authorize St. Mary of Egypt Orthodox Church (legal name Reconciliation Ministries, Inc) to electronically debit my bank account according to the terms outlined below. I acknowledge that electronic debits against my account must comply with United States law.

### Terms of withdrawal:

- One time on \_\_\_\_\_ for the amount of \$ \_\_\_\_\_.  
mm/dd/yy
- Starting on \_\_\_\_\_ and on the \_\_\_\_\_ of each month through \_\_\_\_\_,  
mm/dd/yy day of the month mm/dd/yy  
for the amount of \$ \_\_\_\_\_.

### Donor bank account information:

\_\_\_\_\_  
Routing number                      Account number

Account type:     Checking     Savings     Consumer     Business

This payment authorization is to remain in effect until I, \_\_\_\_\_, notify St. Mary  
Donor name  
of Egypt Orthodox Church of its cancellation by giving written notice in enough time for the organization and receiving financial institution to have a reasonable opportunity to act on it.

\_\_\_\_\_  
Donor signature

\_\_\_\_\_  
Donor printed name

\_\_\_\_\_  
Date