## AUTHORIZATION AGREEMENT FOR DIRECT PAYMENT OF PLEDGES OR GIVING

I (we) authorize Clemmons Presbyterian Church to initiate monthly weekly (check one) withdrawals in the amount of \$, from the account named on this form and authorize the named banking facility (BANK) to debit such withdrawals to my (our) account. Of the withdrawal amount, apply \$ to the Annual Operating Budget and \$ to the Building Fund.	
Name	Name (if Joint Account)
I (we) authorize starting the above withdrawals from my (our) account the Month of, 2019 in 1 <sup>st</sup> halfor after 15 <sup>th</sup> of Month Week of, 2019	
Your Bank NameYour Bank Routing NumberYour Bank Account Number	
Your Account Type: Checking	Savings
This authority remains in effect until December 31, 2019, unless Clemmons Presbyterian Church receives prior written notification from me (or either of us) of its termination in such time and manner as to give Clemmons Presbyterian Church and BANK a reasonable opportunity to act on it.	
Signature	
Signature (if Joint Account)	
Data	