



Authorization for Direct Debit/Direct Withdrawal

Direct Debit via ACH is the withdrawal of funds from a consumer's account for contributions, payment of debts, etc.

I hereby authorize *Empty the Orphanage Ministry* to electronically debit my account (and, if necessary, to electronically credit my account to correct erroneous debits). I agree that ACH transactions I authorize comply with all applicable laws.

Check all that apply: [] Begin Debit [] Change Information

Account:

Checking Account

Name(s) on the Account: _____

Amount of Debit Authorized: \$ _____

Frequency of Debit: _____ (weekly, monthly, annually, etc.)

I understand that this authorization will remain in full force and effect until I notify *Empty the Orphanage Ministry* in writing or by phone stating that I wish to revoke this authorization. I understand that *Empty the Orphanage Ministry* requires at least 2 weeks prior notice in order to cancel this authorization.

Name(s): _____
(Please Print)

Signature(s): _____

Date: _____

****Please include a voided check along with this form and mail to:**

**Empty the Orphanage Ministry
PO Box 6263
Bloomington, IL 61702**