

**Texas Conference of Seventh-day Adventists
P.O. Box 800 | Alvarado, TX 76009**



***Authorization Agreement for
Direct Payment (Remittance) of Church Tithe and Offering Funds***

I(we) hereby authorize Texas Conference of Seventh-day Adventists, to initiate debit entries to the Church's Checking account indicated below at the depository financial institution named below, and to debit the same to such account. The monthly amount for tithes and offerings will be debited once the Church Remittance Report has been submitted by the church treasurer to the Texas Conference.

CHURCH NAME: _____

DEPOSITORY BANK NAME: _____

BRANCH: _____

CITY: _____ STATE: _____ ZIP: _____

ROUTING NUMBER: _____ ACCOUNT NUMBER: _____

This authorization is to remain in full force and effect until the Texas Conference of Seventh-day Adventists has received written notification from me (or either of us) of its termination is such time and in such manner as to afford the Texas Conference a reasonable opportunity to act on it.

DATE: _____ PASTOR'S SIGNATURE: _____

DATE: _____ TREASURER'S SIGNATURE: _____

NOTE: ALL DEBIT AUTHORIZATIONS MUST PROVIDE THAT THE RECEIVER MAY REVOKE THE AUTHORIZATION ONLY BY NOTIFYING THE ORIGINATOR IN THE MANNER SPECIFIED IN THE AUTHORIZATION.