

# RECURRING PAYMENT PLAN AUTHORIZATION FORM: ACH

Complete and return this form to:



**Lake Murray  
Presbyterian Church  
2721 Dutch Fork Rd  
Chapin, SC 29036  
(803) 345-5140**

## ELECTRONIC FUNDS TRANSFER AUTHORIZATION

(Please Print)

I authorize Lake Murray Presbyterian Church, to initiate either an electronic debit, or create and process a demand draft against my Checking or Savings Account for the purpose of collecting childcare related payments. I authorize Lake Murray Presbyterian Church to withdraw sufficient funds to pay my regular childcare fees that are due and payable. I acknowledge that the origination of ACH transactions to my account must comply with the provisioning of United States law.

**Account Holder's Name:**

**Phone:**

**Children Names (if applicable):**

*Please enter children names if the account holder's last name is different.*

**Account Holder's Address:**

**City:**

**State:**

**ZIP Code:**

**Bank/Credit Union Name:**

**Bank/Credit Union Address:**

**City:**

**State:**

**ZIP Code:**

**Bank Account Type:**

☐

Checking

☐

Savings

☐

Business Checking

**Routing Number:**

(See Sample Below)

**Account Number:**

(See Sample Below)

This authorization will remain in full force and effect until I notify Lake Murray Presbyterian Church in writing of its termination. Notification must be received 5 business days in advance of termination date to permit Lake Murray Presbyterian Church and your bank reasonable time to act upon it.

**Signature:**

**Date:**

**PLEASE KEEP A COPY OF THIS AUTHORIZATION FOR YOUR RECORDS**

(Please attach a copy of a voided check below - deposit slips not accepted)

Bank Name Street Address City, State, ZIP	⑆044 204 224⑆ 02999999999⑆00403
This is the location of the 9 digit Transit Routing Number for your Bank.	This is where you will find your account number.