



11650 Northland Drive / Rockford, MI 49341 / (616) 863-2226

AUTHORIZATION AGREEMENT FOR ELECTRONIC FUND TRANSFER

Please Print or Type

Company **CONTINENTAL BAPTIST MISSIONS** Company ID # **38-1398829**

I hereby authorize the above noted **COMPANY** to initiate debit and/or credit entries to the following accounts for the amount indicated below and the Receiving Financial Institution named below to debit and/or credit the same to such account. I also understand the Company reserves the right to originate a debit and/or credit transaction to correct an error on the original transaction. This authority is to remain in full force and effect until **COMPANY** has received written notification from me or its termination in such time and manner as to afford **COMPANY** and **RECEIVING FINANCIAL INSTITUTION** a reasonable opportunity to act on it.

Name(s) on Account _____

Name of Financial Institution _____

Receiving ABA/Routing Number	Account Number	Checking or Savings (C/S)	Amount

Authorized Signature _____

Date _____