



Debit Authorization

Please complete the following to authorize First Baptist Church, Murray, KY to debit donations directly from your bank account. Choose ONE of the following funds:

☐ Budget ☐ WMO ☐ Family Life Center ☐ Benevolent

Name: _____ Phone #: _____

Bank Name: _____

Type of Depositor Account: ☐ checking ☐ savings (if allowed by bank)

Routing #

--	--	--	--	--	--	--	--	--	--	--	--	--

Your Bank Account number:

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Please attach voided check

Amount to be debited:	\$ _____
First Automatic Debit:	Date: _____
<input type="checkbox"/> Each month thereafter debits on:	Day of month 1 <input type="checkbox"/> 15 <input type="checkbox"/>
<input type="checkbox"/> Each week thereafter debits on:	Monday

Your signature: _____ Date: _____

Your instructions and your signature allows:

1. I instruct you to pay direct debits from my account at the request of First Baptist Church, Murray, KY.
2. I will inform you and my bank should I wish to cancel this instruction.
3. I understand that if any direct debit is paid which breaks the terms of this instruction, First Baptist Church, Murray, KY will make a refund.