



# AUTHORIZATION AGREEMENT FOR PREAUTHORIZED DEBIT

I hereby authorize WSFS Bank to initiate debit entries to my deposit account for the credit of Connection Community Church.

### Credit Account Information:

WSFS Bank #031100102

Account #207742883

### Debit Account Information:

Account Title \_\_\_\_\_

Bank \_\_\_\_\_

Bank Address \_\_\_\_\_

Bank Routing Number \_\_\_\_\_

Account Type (checking, savings) \_\_\_\_\_

Account Number \_\_\_\_\_

Amount of each debit \$ \_\_\_\_\_

Date(s) of each debit: check one or both  15<sup>th</sup> of month  Last work day of month

Effective date \_\_\_\_\_

*This authorization will remain effective until Connection Community Church receives written notification. The termination of the agreement will be effective once Connection Community Church has had reasonable opportunity to act on the notice.*

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

PRINTED NAME \_\_\_\_\_

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

PRINTED NAME \_\_\_\_\_

YOUR NAME 1234 Main Street Anywhere, OH 00000		DATE _____
PAY TO THE ORDER OF _____		\$ _____
_____ DOLLARS		
⑆0⑆4⑆0⑆7⑆2⑆3⑆2⑆4⑆	⑆000⑆1⑆2⑆3⑆4⑆5⑆6⑆7⑆8⑆9⑆	⑆1⑆2⑆3⑆
ROUTING NUMBER	ACCOUNT NUMBER	CHECK NUMBER