

CORNERSTONE GENERAL FUND DEBIT AUTHORIZATION

I (we) hereby authorize CORNERSTONE UNITED METHODIST CHURCH, hereinafter called CUMC, to initiate debit entries for **CUMC's GENERAL FUND** to my (our) account indicated below and the financial institution named below, hereinafter called FINANCIAL INSTITUTION, to credit the same to such account. I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of U.S. law.

Account

(Financial Institution Name)

(Branch)

(Address)

(City/State)

(Zip)

_____ Type of Acct: ___ Checking ___ Savings
(Routing Number) (Account Number)

_____ Amount

Frequency: Weekly _____ Day of Week to withdraw _____ Beginning date
Monthly _____ Withdrawal date _____ Beginning date
Semi-monthly _____ Withdrawal dates _____ Beginning date
Bi-weekly _____ Day of Week to withdraw _____ Beginning date

This authority is to remain in full force and effect until CUMC has received written notification from me (or either of us) of its termination in such time and manner as to afford CUMC and FINANCIAL INSTITUTION a reasonable opportunity to act on it.

(Print Individual Name)

(Signature)

(Date)

**PLEASE ATTACH COPY OF VOIDED CHECK TO THIS FORM
DIRECT FORM TO THE ATTENTION OF MITZIE WHITTEN,
CORNERSTONE UNITED METHODIST CHURCH, 1910 DISCIPLE DRIVE,
JONESBORO, AR 72401**