

ACH Deduction Authorization Form

I (we) hereby authorize **Loudonville Community Church** to initiate entries to my (our) checking/savings account and, if necessary, to initiate adjustments for any transactions posted in error. This authority will remain in effect until Loudonville Community Church is notified by me (us) in writing, 30 days in advance, to cancel it.

Name (Please Print)	Address (Please Print)
Phone	Address (Please Print)
Email Address	

I (we) authorize deductions on the following days for the stated amounts.

1st Monday of the Month

\$ _____	General Fund
\$ _____	Missions Fund
\$ _____	Missions-Individual _____
\$ _____	Missions-Individual _____
\$ _____	Missions-Individual _____
\$ _____	Building Fund
\$ _____	Bears Fruit Food Pantry
\$ _____	Care Group
\$ _____	The Daniel Fund (provides financial assistance for children of LCC members to attend LCS)
\$ _____	TOTAL

2nd Monday of the Month

\$ _____	General Fund
\$ _____	Missions Fund
\$ _____	Missions-Individual _____
\$ _____	Missions-Individual _____
\$ _____	Missions-Individual _____
\$ _____	Building Fund
\$ _____	Bears Fruit Food Pantry
\$ _____	Care Group
\$ _____	The Daniel Fund (provides financial assistance for children of LCC members to attend LCS)
\$ _____	TOTAL

3rd Monday of the Month

\$ _____	General Fund
\$ _____	Missions Fund
\$ _____	Missions-Individual _____
\$ _____	Missions-Individual _____
\$ _____	Missions-Individual _____
\$ _____	Building Fund
\$ _____	Bears Fruit Food Pantry
\$ _____	Care Group
\$ _____	The Daniel Fund (provides financial assistance for children of LCC members to attend LCS)
\$ _____	TOTAL

4th Monday of the Month

\$ _____	General Fund
\$ _____	Missions Fund
\$ _____	Missions-Individual _____
\$ _____	Missions-Individual _____
\$ _____	Missions-Individual _____
\$ _____	Building Fund
\$ _____	Bears Fruit Food Pantry
\$ _____	Care Group
\$ _____	The Daniel Fund (provides financial assistance for children of LCC members to attend LCS)
\$ _____	TOTAL

5th Monday of the Month

\$ _____	General Fund
\$ _____	Missions Fund
\$ _____	Missions-Individual _____
\$ _____	Missions-Individual _____
\$ _____	Missions-Individual _____
\$ _____	Building Fund
\$ _____	Bears Fruit Food Pantry
\$ _____	Care Group
\$ _____	The Daniel Fund (provides financial assistance for children of LCC members to attend LCS)
\$ _____	TOTAL

I authorize deductions for the above days and amounts.

Signed

Date

Date I wish deductions to begin _____

Please attach a voided check or savings account deposit slip.