

CAVALIER BAPTIST CHURCH
PO Box 338
Cavalier, ND 58220

Direct Deposit of Offering/Contribution Authorization Form

I (we) hereby authorize Cavalier Baptist Church to initiate debit entries to my (our) bank account indicated below at the Financial Institution named below, and to debit the same to such account. I (we) agree to have available funds in my (our) account on the designated date to effect this transfer. This authority is to remain in effect until I (or either of us) notify Cavalier Baptist Church of its termination in such time and in such manner as to afford a reasonable opportunity to act. I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of U.S. law.

United Valley Bank
211 Division Ave S
Cavalier, ND 58220

Transfer to: Cavalier Baptist Church

Frequency of Transfer:

Weekly: ___ (Monday) **Semi-Monthly:** ___ (1st & 15th) **Monthly:** ___ (1st or 15th)(circle preference)

Amount of Transfer: \$ _____

NOTE: If this date falls on a Saturday, Sunday or Bank Holiday, this transfer will automatically be made on the following business day.

Transfer From:

Bank Name: _____

Routing Number: _____

Account number: _____

Account Type: ___ Checking ___ Savings

Customer Name: _____

Signature: _____

Date: _____

Please return this form (signed) to the Church Office or Email a signed copy to cavalierbaptist@polarcomm.com.