

Literature And Teaching Ministries

Authorization Agreement for DIRECT PAYMENTS (ACH Debits)

I/we hereby authorize Literature And Teaching Ministries, hereinafter called LATM, to initiate debit entries to my/our ___Checking Account ___Savings Account (select one) indicated below at the depository financial institution named below, hereafter called DEPOSITORY, and to debit 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.

Bank / Depository _____ Branch _____
City _____ State _____ ZIP _____
Routing Number _____ Account Number _____

This authorization is to remain in effect until LATM has received written notification from me/either of us of its termination in such time and such manner as to afford LATM and DEPOSITORY a reasonable opportunity to act on it.

Printed Name _____ ID Number* _____

Signature _____ Date _____

*LATM will assign an ID Number.

Please attach a copy of a voided check to this form and return to: LATM, PO Box 645, Joplin MO 64801

FOR REGULARLY OCCURING DONATIONS, FILL IN THE FOLLOWING:

Under this direct deposit agreement, I wish to contribute \$ _____ to LATM,
once every ___ month (___2nd of each month, or ___15th of each month)
___quarter ___other: _____ (select one, explain "other")

Designations:

General Fund _____ Book of the Month _____ Other _____

The first transaction will occur no less than ten business days after authorization is received.