



PRESBYTERY *of*
SAN FRANCISCO

545 Ashbury Avenue, El Cerrito, CA 94530

AUTHORIZATION AGREEMENT FOR DIRECT DEPOSIT

This form is designed to allow the Presbytery to pay you via ACH rather than paper checks

RECIPIENT NAME: _____

RECIPIENT ADDRESS: _____

RECIPIENT CITY: _____

I hereby authorize the Presbytery of San Francisco to deposit any funds the Presbytery agrees to disburse to my person or our organization into the banking account listed below.

Name of Bank: _____

Checking Y or N

Savings Y or N

Routing number: _____

Account Number: _____

This authority is to remain in full force and effect until RECIPIENT sends written notification to the Presbytery of San Francisco of its termination.

Print Name of Treasurer: _____

Signature of Treasurer: _____

[Please attach a voided check below. Without this, the process will not be initiated]