



**AUTOMATIC LOAN  
PAYMENTS**

**1 MINISTRY INFORMATION**

COMPLETE NAME OF MINISTRY

DOING BUSINESS AS (DBA) *if applicable*

MINISTRY ADDRESS (NO P.O. BOX PLEASE)

CITY	STATE	ZIP
MINISTRY PHONE (      )	MINISTRY FAX (      )	

**2 AUTOMATIC TRANSFER DETAILS**

PLEASE TRANSFER THIS AMOUNT \$	SOURCE ACCOUNT NUMBER (Include Suffix)	ACCOUNT TYPE (CHECK ONE) <input type="checkbox"/> Checking <input type="checkbox"/> Savings	LOAN ACCOUNT NUMBER (Include Suffix)
MONTHLY ON THE SELECTED DATE (CHECK ONE) <input type="checkbox"/> 1 <sup>st</sup> <input type="checkbox"/> 5 <sup>th</sup> <input type="checkbox"/> 10 <sup>th</sup> <input type="checkbox"/> 15 <sup>th</sup> <input type="checkbox"/> 20 <sup>th</sup> <input type="checkbox"/> 25 <sup>th</sup> <input type="checkbox"/> 30 <sup>th</sup>		LOAN COMMENCING DATE mm / dd / yy	

Loan payment automatic transfers will continue until revoked in writing by the Ministry (Church/Organization) or the Credit Union, or when the loan is paid in full. We accept responsibility for having funds in our account to cover payments/transfers. There will be a charge if sufficient funds are not in the account. If this occurs three times, the transfer will be automatically revoked.

**4 AUTHORIZING OFFICERS > These officers authorize the above service.**

AUTHORIZING OFFICER SIGNATURE <b>X</b>	PRINTED NAME	POSITION/TITLE	DATE
AUTHORIZING OFFICER SIGNATURE <b>X</b>	PRINTED NAME	POSITION/TITLE	DATE

**FOR CREDIT UNION USE ONLY**

PROCESSED BY	DATE
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