



**1. Ministry Information**

COMPLETE NAME OF MINISTRY		EMPLOYER ID NUMBER OR TAX ID NUMBER	ACCOUNT NUMBER
DBA if any			
STREET ADDRESS (NO P.O. BOX PLEASE)		CITY	STATE ZIP
MAILING ADDRESS (IF DIFFERENT FROM ABOVE)		CITY	STATE ZIP
PHONE ( )	FAX ( )	WEBSITE	PRIMARY BANKING CONTACT PERSON

**2. Automatic Payment Options**

Total Amount Due (only available for credit card accounts)    
  Minimum Payment Due (including any outstanding fees)  
 Fixed Payment Amount greater than the minimum payment (including any outstanding fees) \$

**3. Credit Card Information**

Credit Card Control Account Number \_\_\_\_\_ DATE PAYMENTS TO BEGIN \_\_\_\_/\_\_\_\_/\_\_\_\_  
 Individual Credit Card Account Number \_\_\_\_\_ DATE PAYMENTS TO BEGIN \_\_\_\_/\_\_\_\_/\_\_\_\_  
 (IF NO CONTROL ACCOUNT IS ASSIGNED)

**4. Loan Information**

LOAN ACCOUNT NUMBER (INCLUDING SUFFIX) \_\_\_\_\_ DATE PAYMENTS TO BEGIN \_\_\_\_/\_\_\_\_/\_\_\_\_    
 OR      Next Payment Due Date

**5. Account Information (source account)**

<input type="checkbox"/> Christian Community Credit Union	ROUTING NUMBER 322274831	ACCOUNT NUMBER & SUFFIX	ACCOUNT TYPE (CHECK ONE) <input type="checkbox"/> Checking <input type="checkbox"/> Savings
NAME OF OTHER FINANCIAL INSTITUTION <input type="checkbox"/>	ROUTING NUMBER		<input type="checkbox"/> Checking <b>(PROVIDE A VOIDED CHECK)</b>
PHONE NUMBER OF SOURCE FINANCIAL INSTITUTION ( )	ACCOUNT NUMBER		<input type="checkbox"/> Savings

**6. Loan Authorization and Acknowledgement of Agreement**

We hereby authorize the Christian Community Credit Union (CCCU) to initiate debit entries and, if necessary, initiate credit/debit corrections to the checking/savings share account indicated above. If automatic payments are required as a condition of a loan or as a loan covenant, this authority will remain in full force and effect until the loan is paid in full. Otherwise, automatic payments will remain in full force and effect until CCCU receives written notification of termination in such manner as to allow CCCU a reasonable opportunity to act. In addition, we agree to the following terms and conditions:

- A. We understand that CCCU reserves the right to cancel this agreement and terminate automatic payments, with or without cause. If terminated, CCCU will send us written notification.
- B. We understand and agree that if we select "Minimum Payment Due (including any outstanding fees)" as our option in the Automatic Payment Options in box 2 above, it means that we are authorizing CCCU to deduct the minimum payment that is currently due under the loan obligation, which may include (in addition to the regular monthly payment):
  - a) past due amounts, and
  - b) payment amount increases related to the following reasons:
    - i. an increase in the interest rate of the loan following a default,
    - ii. predetermined rate reprices,
    - iii. fluctuation of a variable or adjustable interest rate,
    - iv. rate adjustments resulting from the conversion of the loan from construction to permanent financing, and
    - v. other amounts added to the loan by CCCU as permitted under the terms of our loan agreement.
- C. We understand and agree that if we select "Fixed Payment Amount greater than the minimum payment (including any outstanding fees)" as our option in the Automatic Payment Options in box 2 above, in addition to the terms set forth in item B above in this box 6 regarding authorizing CCCU to deduct the minimum payment that is currently due under the loan obligation, we understand that CCCU will first apply the Fixed Payment Amount indicated in box 2 above to satisfy the current minimum payment due and that, as a result, there may not be any extra funds to apply to the principal beyond the amount the minimum payment requires.
- D. When this automatic payment is for a loan, we understand that the payment will be deducted on the due date shown on the promissory note ("payment transfer date").
- E. When this automatic payment is for a credit card, we understand that the payment will be deducted approximately 25 days after the closing date of the statement.
- F. When this automatic payment amount is greater than the outstanding balance, we authorize CCCU to pay off the balance in full and any related fees, and then reimburse any overage to the share account that was the source of the payment, if the source of the payment is a CCCU account. If the source of the payment was not a CCCU account, a check will be mailed to the mailing address on record.
- G. We understand that funds deposited at an affiliate deposit branch may not be available for automatic payment withdrawal for 2 Business days from the date of deposit.
- H. When the source account for the automatic payment is a CCCU share account, we understand that CCCU may continue to attempt to transfer the payment amount in the days following the initial attempt until the payment is successfully transferred.
- I. When the source account for the automatic payments is at a financial institution other than CCCU, we understand that CCCU may attempt to complete the scheduled payment transfer as many times as allowed by the source financial institution until the payment is successfully transferred. We further understand that NSF or other related fees may be charged by the source financial institution.
- J. We understand and agree that CCCU shall not be responsible for any act or failure to act on their part, except in the case of gross negligence or willful misconduct. Furthermore, we agree to hold CCCU harmless for any claims, liabilities, attorneys' and other costs and expenses of any and every kind and nature which we may incur as a result of CCCU's performance under this authorization agreement.

We understand that if this automatic payment authorization form is submitted subsequent to any existing automatic payment authorization forms, this form supersedes all other automatic payment authorization forms for the loan account(s) and credit card account(s) listed above, effective immediately.

**7. The following officers authorize the above service (Two Signatures Required)**

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

For Credit Union Use Only	Processed By	Date
---------------------------	--------------	------