



CONSUMER AUTHORIZATION FOR DIRECT PAYMENT VIA ACH (ACH DEBITS)

Direct Payment via ACH is the transfer of funds from a consumer account for the purpose of making a payment.

I (we) authorize Congregation Shir Ha-Ma'alot (CSHM) to electronically debit my (our) account (and, if necessary, electronically credit my (our) account to correct erroneous debits) as follows:

Select One:

Checking Account

Savings Account

at the depository financial institution named below ("DEPOSITORY"). I (WE) AGREE that ACH transactions I (we) authorize comply with all applicable law.

Depository Name _____

Routing Number _____

Account Number _____

Amount of debit(s) or method of determining amount of debit(s) [or specify range of acceptable dollar amounts authorized]: _____

Date(s) and /or frequency of debit(s): _____

I (we) understand that if the financial institution is not able to process the payment due to insufficient funds, I (we) will be charged any associated fees or penalties.

I (we) understand that this authorization will remain in force and effect until I (we) notify CSHM in writing by mail to CSHM, 3652 Michelson Drive, Irvine, CA 92612 or via email sent to beth@shmtemple.org, or by phone (949) 857-2226, that I (we) wish to revoke this authorization. I (we) understand that CSHM requires at least 10 days.

Name(s) _____ (Please print)

Date _____ Signature(s) _____