



**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
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MINISTRY PHONE ()	MINISTRY FAX ()
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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)
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MONTHLY ON THE SELECTED DATE (CHECK ONE) <input type="checkbox"/> 1 st <input type="checkbox"/> 5 th <input type="checkbox"/> 10 th <input type="checkbox"/> 15 th <input type="checkbox"/> 20 th <input type="checkbox"/> 25 th <input type="checkbox"/> 30 th	LOAN COMMENCING DATE mm / dd / yy
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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 X	PRINTED NAME	POSITION/TITLE	DATE
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AUTHORIZING OFFICER SIGNATURE X	PRINTED NAME	POSITION/TITLE	DATE
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FOR CREDIT UNION USE ONLY	PROCESSED BY	DATE
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