



DEBIT AUTHORIZATION FROM DONOR'S BANK ACCOUNT TO LIVING RIVER'S OPERATIONS ACCOUNT

I, _____ (payer name), do hereby authorize **Living River: A Retreat on the Cahaba** to debit the account designated below, via ACH Direct Debit, for the purpose of charitable donation only. (Eligible accounts include bank/credit union checking accounts, money market accounts and savings accounts). Accounts will be debited on the **5th of each month** (unless it is a weekend or bank holiday).

Designated Account

Name(s) on the Account _____

Bank/Credit Union Name _____

Your account number _____

Your financial institution's routing number
(also known as the ABA Number) _____

Your email address _____

Your address _____

Your phone number _____

If you wish to change, add or delete a designated account, you should email office@livingriver.org immediately to reduce the chance for error.

I authorize a monthly donation of the amount indicated below to be debited from my account on the 5th of each month (unless the 5th falls on a weekend or holiday and it will be debited on the next work day.)

(Circle one or fill in the other amount space.)

\$25 per month \$50 per month \$100 per month \$250 per month \$500 per month \$1,000 per month

Other amount _____ per month (\$10 per month minimum)

Signature of account owner

Printed name of signature

To assure accuracy, attach your first month's payment on a check from this account or attach a voided check from this account. If you do not have a check, please attach a printout showing the account number and bank routing number.

If you need to mail this form to Living River: Please send it to
Beth Anthony, Living River, 2000 Living River Parkway, Montevallo, AL 35115
or scan it to office@livingriver.org.