



DIRECT PAYMENT VIA ACH (ACH DEBIT)
#Kingdom5 Monthly Gift Support

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

I (we) authorize The Johnson County Christian Academy to electronically debit my (our) account (and, if necessary, electronically credit my (our) account to correct erroneous debits) as follows:

___Checking Account/ ___ Savings Account (select one) 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) for specify range of acceptable dollar amounts: **\$5.00 or** _____

Date (s) and/ or frequency of debits: **On the 5th of each month**

I (we) understand that this authorization will remain in full force and effect until I (we) notify The Johnson County Christian Academy in writing, by phone, location, address. I (we) wish to revoke authorization.

Name (s) _____

Mailing Address: _____

Email: _____

(Please print)

Date _____ Signature (s) _____

Mail or Fax Completed form to:

The Johnson County Christian Academy
401 S. Walnut St
Centerview, MO 64019
FAX NUMBER: 660-656-3320 God bless your contribution