

Electronic Funds Transfer Form

Print and complete the form. Fill out the amount you want to have deducted each month.
Mail the completed form and a voided check in an envelope to:
ACCTS, P.O. Box 27239, Denver, Colorado 80227.

Please sign me up for ACCTS direct deposit!

I authorize my bank to transfer the following amount to the Association for Christian Conferences, Teaching and Service (ACCTS) each month on the 5th to support the ministry of ACCTS:

Ministry	Amount	Ministry	Amount
_____	\$ _____	_____	\$ _____
_____	\$ _____	_____	\$ _____

Monthly Total \$ _____

Name _____

Address _____ City _____ State _____ Zip _____

Phone _____

Signature _____ Date _____

Please remember to enclose a voided check in an envelope. The direct deposits will start in about 4 to 6 weeks after we receive your response. Thank you in advance for your support of the world-wide ministry of ACCTS.

This permission to charge my bank account is the same as if I had personally signed a check to ACCTS. This agreement will remain in effect until:

1. I write a note to ACCTS telling them to end this agreement and they have a reasonable amount of time to act on it. Or,
2. ACCTS or my bank sends me 10 days' written notice that this agreement will end.

In the event of an error, I have the right to tell my bank to reverse any transfer. However, I must tell them in writing within 15 days of the date on the bank of statement of within 45 days after the transfer was made.

I understand and agree that my bank is responsible for the accurate and timely posting of my transferred gift(s). In the event of an amount or double posting error, I will handle this problem directly with ACCTS.