GRAND FORKS ZION UNITED METHODIST CHURCH 1001 24TH Ave S Grand Forks ND 58201

Direct Deposit of Offering/Contribution Authorization Form

I (we) hereby authorize Grand Forks Zion United Methodist Church to initiate debit entries to my (our) bank account indicated below at the Financial Institution named below, and to debit the same to such account. I (we) agree to have available funds in my (our) account on the designated date to effect this transfer. This authority is to remain in effect until I (or either of us) notify Grand Forks Zion United Methodist Church of its termination in such time and in such manner as to afford a reasonable opportunity to act. I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of U.S. law.

Transfer to: Grand Forks Zion United Methodist Church

United Valley Bank 211 Division Ave S Cavalier ND 58220

(Signature)

Amount of Transfer: \$____ Frequency of Transfer Weekly: Monday Semi Monthly: ____ 1st & 15th 1st or 15th Monthly: If this date falls on a Saturday, Sunday, or bank holiday, this transfer will automatically be made on the following business day. Transfer From: Bank Name: Routing Number: Account Number:_____ Acct Type: ____ Checking ____ Savings Customer Name:____ Signature: Date: _____ I hereby authorize United Valley Bank to cancel the above described automatic entry effective as