[Church Name] Revocation of Prior Authorization for an Automatic (Direct) Deposit

Company Name & Address:	
any of my/our accounts at any financial insentries, and to initiate any debit entries naccount (identified below) at the Financial	e company (defined above) to initiate credit entries to stitution. I/we authorize the Company to initiate credit needed to correct erroneous credit entries, to my/our cial Institution (identified below) for the purpose of ount. I/we acknowledge that the origination of these w.
Account: ☐ Checking/Share Draft ☐ ☐ Other	
Account Number:	
Taxpayer Identification Number(s):	
Signature	Signature
Print Name	Print Name

^{*}Provide this form to any third party initiating any automatic direct deposits to your old account.