

## AUTHORIZATION FOR PREAUTHORIZED PAYMENTS

**I/We authorize St. Mark Coptic Orthodox Church in Troy Michigan to initiate debit entries to my/our account as identified below:**

AMOUNT \$ \_\_\_\_\_

FREQUENCY:  Weekly  Monthly  Others \_\_\_\_\_

MY BANK'S NAME: \_\_\_\_\_

ROUTING NO: \_\_\_\_\_  Voided check/draft/deposit slip attached

ACCOUNT NO: \_\_\_\_\_  CHK  SAV

NAME(S) (Print or Type): \_\_\_\_\_  
(As appears on the check)

\_\_\_\_\_  
(Signature) (Date)

\_\_\_\_\_  
(Spouse Signature) (Date)

Phone #: \_\_\_\_\_

E-mail: \_\_\_\_\_

### Sample Check

TONY MAPLE  
JENNIFER MAPLE  
123 Pear Lane  
Anyplace, GA 00000

PAY TO THE ORDER OF \_\_\_\_\_ \$ \_\_\_\_\_

ANYPLACE BANK  
Anyplace, GA 00000

For \_\_\_\_\_

1234

15-00000000

Routing number: 250250025

Account number: 202020

Do not include the check number.

250250025 | 202020 86 1234



*The routing and account numbers may be in different places on your check.*