

## **Xenos Christian Fellowship, Inc. – Investing, Building, Reaching Authorization for Automatic Payment**

I authorize Xenos Christian Fellowship, Inc. and the financial institution named below to initiate entries to my checking/savings account. This authority will remain in effect until I notify you in writing to cancel it in such time as to afford the financial institution a reasonable opportunity to act on it. I can stop payment of any entry by notifying my financial institution three (3) days before my account is charged. I can have the amount of erroneous charge immediately credited to my account up to 15 days following issuance of my financial institution's statement or 60 days after posting, whichever occurs first.

\_\_\_\_\_  
Name of Bank

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Your Name

Phone Number \_\_\_\_\_

\_\_\_\_\_  
Your Address

Checking Account # \_\_\_\_\_ OR Savings Account # \_\_\_\_\_

Routing Number \_\_\_\_\_  
(Between the : symbols on the bottom left of your check)

Debit my account for \$ \_\_\_\_\_ Beginning \_\_\_\_\_, 200\_\_

Debit my account for the above amount on:

\_\_\_\_\_ The 1<sup>st</sup> of each month

\_\_\_\_\_ The 16<sup>th</sup> of each month

\_\_\_\_\_ Both the 1<sup>st</sup> and 16<sup>th</sup> of each month

Attach a voided check of deposit slip here

Mail completed form to:

Alan Burkholder  
Xenos Christian Fellowship  
1340 Community Park Dr.  
Columbus OH 43229