



Revealing God's presence to those in need.

PO Box 15224, Syracuse, New York 13215 • 315-928-5191 • info@emmausministry.org • www.emmausministry.org

Direct Payment Authorization for ACH Debits

Direct Payment Authorization for ACH Debits Direct Payment via ACH is the transfer of funds from a donor's account for the purpose of making a donation to Road to Emmaus Ministry of Syracuse, Inc..

I /We authorize Emmaus Ministry of Syracuse, Inc. to electronically debit my/our account (and if necessary, electronically credit my/our account to correct erroneous debits) noted below. I/We agree that ACH transactions I/we authorize comply with all applicable law.

Bank Name: _____

Routing/ABA#: _____ **Account#:** _____

SELECT ONE: Checking Savings

ATTACH A COPY OF A VOIDED CHECK AS WELL

Amount of debit: \$ _____

Please add 3% to my gift to help defray the cost to Road to Emmaus Ministry of Syracuse, Inc.

Frequency of debit (select one):

One Time Monthly, the 15th day of each month* Quarterly, Jan 15, April 15, July 15, Oct 15*

I/We understand that this authorization will remain in full force and effect until I/we notify Emmaus Ministry of Syracuse, Inc. in writing by mail to P.O. Box 15224, Syracuse, NY 13215, that I/we wish to revoke this authorization. I/We understand that Emmaus Ministry of Syracuse, Inc. requires at least 15 days prior notice to cancel this authorization.

Name(s): _____ **Phone #** _____

Address: _____

Email Address: _____

Signature: _____ **Date:** _____

(*Note: If the 15th is not a business day, the transaction will occur on the next available business day.)

