



AUTHORIZATION AGREEMENT ACH FOR ELECTRONIC DONATIONS

I hereby authorize TECATE MISSION INTERNATIONAL (TMI) to initiate debit entries or such adjusting entries, either debit or credit, which are necessary for corrections, to my Checking _____ or Savings _____ account indicated below and the financial institution named below to debit (or credit) the same to such account.

FINANCIAL INSTITUTION NAME **BRANCH** **CITY** **ST**

TRANSIT / ROUTING NUMBER **ACCOUNT NUMBER**

I hereby authorize TECATE MISSION INTERNATIONAL to debit my account in the amount of \$_____.00 per month on the ___ 5th day or ___ 20th day of the each month. I wish to designate my donation to the TMI ministry account: _____ (i.e. General Fund, Name of Missionary, etc.)

This authority is to remain in full force & effect until TECATE MISSION INTERNATIONAL has received written notification from me of its termination, in such time and in such manner as to afford TECATE MISSION INTERNATIONAL a reasonable opportunity to act on it.

NAME (Print)

ADDRESS **CITY** **ST** **ZIP**

PHONE NUMBER

SIGNATURE **DATE**