

St. Paul Lutheran Church
116 E Military Rd
Postville, IA 52162



**Evangelical Lutheran
Church in America**
God's work. Our hands.

Phone: 563-864-7643

E-mail: stpaulparishsec@gmail.com

AUTHORIZATION AGREEMENT FOR ACH

I hereby authorize St. Paul Lutheran Church to initiate credit entry to my
() Checking () Savings account (select one) from the Financial institution named below.

Payment amount \$ _____ Beginning on _____

Frequency () Weekly () Monthly

General Offering () Special Monthly Envelope Offering ()

Depositor name _____

Routing Number _____

Account Number _____

Bank Name _____

This authorization is to remain in effect until St Paul Lutheran Church has received notification of termination in such manner as St Paul Lutheran Church and Depository have a reasonable opportunity to act on it.

Signed _____ Date _____

Office Signature _____ Date _____

Mission: Marked by the cross of Christ forever through Baptism, we are claimed, gathered, and sent for the sake of the Gospel.