



AUTHORIZATION AGREEMENT FOR AUTOMATIC LOAN PAYMENTS (ACH DEBITS)

Borrower Information

Church Name *(Please Print)*

Church Phone Number

Church Address

City

State

Zip

Lender Information

ASSEMBLIES OF GOD LOAN FUND, Springfield, Missouri

This will authorize Assemblies of God Loan Fund Inc., hereinafter called AGLF, to initiate debit entries and to initiate, if necessary, credit entries and adjustments for any credit entries in error, to account indicated below for monthly payments due on the loan indicated below. This authorization is to remain in force until AGLF has received written notice of its termination in such time and in such manner as to afford AGLF and DEPOSITORY a reasonable opportunity to act on it. Termination will automatically require that subsequent mortgage payments be made according to the terms of the note and Deed of Trust or as instructed by AGLF. This authorization does not change the terms of your contract.

This will authorize the BANK indicated on the attached check, and as listed below, to debit and/or credit the same to the account.

AGLF reserves the right to revoke this authorization in the event of stop payment on a draft without prior notification, account closed without prior notification, and/or two or more insufficient funds drafts in one year. Reinstatement in this program will be considered after a period of six months.

Bank Information

Bank Name *(Please Print)*

Bank Phone Number

Bank Address

City

State

Zip

Church Bank Account Number

Bank Routing Number for Electronic Payment Transfers
(Call bank for 9-digit number)

- Savings
 Checking

Authorization

Please apply the amounts below to loan number: _____

Monthly loan payment amount: \$ _____

Additional monthly amount to be applied to principal: \$ _____

Total Monthly Payment: \$ _____

Signature

Date

Second Signature *(if required)*

Date

Please mail completed form to:
AG Financial Solutions
Attn: Loan Servicing
PO Box 1867
Springfield, MO 65801

PLEASE ATTACH VOIDED CHECK HERE