HINDU TEMPLE OF FRESNO

Direct Deposit Authorization Form

7699 E. Alluvial Ave, Clovis, CA 93611
(559) 325-7770
www.hindutemplefresno.org

By completing and returning this form, you will be on your way to establishing a convenient way of making a monetary contribution to the Hindu Temple of Fresno. This authorization to draft your account on or about the 15th of each month will remain in effect until we have received written notification from you of its termination. Should you wish to cancel, please provide the Hindu Temple of Fresno and the Financial Institution a reasonable opportunity to act on your request.

Last Name

First Name MI

Work Phone

Action *(select one)*
____ New ____ Change
____ Cancel

Effective Date
Month Day Year

Amount to debit per month: $ _____

Name of Financial Institution

Account Number (Include hyphens but omit spaces and special symbols.)

Type of Account
Checking Savings

Routing Transit Number (All 9 boxes must be filled. The first two numbers must be 01 through 12 or 21 through 32.)

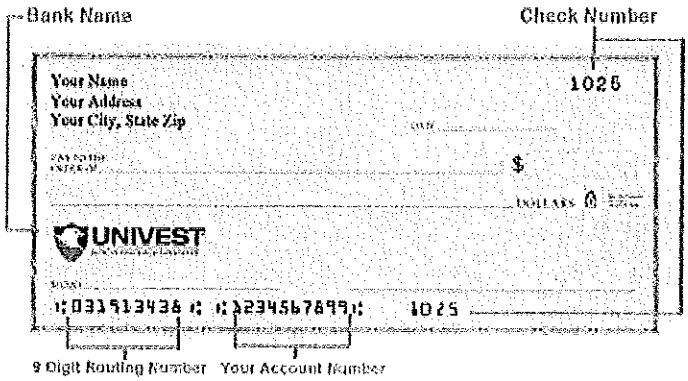
Ownership of Account
Self Joint Other

I/We hereby authorize Hindu Temple of Fresno to initiate debit entries to my/our bank account indicated above and the financial institution named above to debit the same to such account.

Signature: _____ **Date:** _____

If the account is a joint account or in someone else's name, that individual must also agree to the terms stated about and sign below.

Signature: _____ **Date:** _____



Your donations to Hindu Temple of Fresno are tax deductible
Tax ID # 77-0494776