



# Recurring Donation via ACH Authorization

Thank you for choosing to support SOS with your recurring giving through direct deposit. Your commitment helps us provide crucial assistance to those in need. **Your gift will be debited on the 15th of each month.**

### Billing Information

Name(s) (Print) \_\_\_\_\_

Billing Address \_\_\_\_\_

Phone # \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Email \_\_\_\_\_

I authorize SOS Community Services to initiate debit entries to my account indicated below and the Financial Institution named below, hereinafter called "Financial Institution," to debit the same account on the **15th of each month**. I acknowledge that the origination of ACH transactions to my account must comply with U.S. law and NACHA Rules.

### Account Details:

Financial Institution Name:			
City		State	Zip
Routing Number			
Account Number			
Type of Account	<input type="checkbox"/> Checking	<input type="checkbox"/> Savings	

### Payment Details:

<input type="checkbox"/> Fixed Payment	Dollar Amount \$			
Frequency:	<input type="checkbox"/> Weekly	<input type="checkbox"/> Monthly	<input type="checkbox"/> Quarterly	<input type="checkbox"/> Other

This authorization is to remain in full force and effect until SOS Community Services has received written notification from you (or any authorized account signer) of its termination in such time and manner as to afford SOS a reasonable opportunity to act on the request. A receipt for each payment will be provided to you and the charge will appear on your bank statement as an "ACH Debit." You agree that no prior-notification will be provided unless the date or amount changes, in which case you will receive notice from us at least 10 days prior to the payment being collected.

SIGNATURE \_\_\_\_\_  
(Account Holder(s) Signature)

DATE \_\_\_\_\_

To stop or change your donation, please contact SOS's Development Associate, Daphne Salter at 734-961-1950 or [daphnes@soscs.org](mailto:daphnes@soscs.org). **To return this form, you can save and email it to [daphnes@soscs.org](mailto:daphnes@soscs.org), fax it to 734-485-8739 or mail it to our Administrative Building at SOS Community Services, Attn: Daphne Salter at 101 S Huron St, Ypsilanti, MI 48197.**