



Friendship Missionary Baptist Church

Dr. Clifford A. Jones, Sr.-Senior Minister

3400 Beatties Ford Road

Charlotte, NC 28216

Phone—704-392-0392

Fax—704-391-5800

First Fruits Ministry ACH Transaction Form

Name(s):

Envelope #(s):

Deduction Authorization

I understand and authorize a deduction of \$ from the bank account specified below on the 5th, 20th and/or the last Friday of each month until FMBC receives written notification from me of its termination. These deductions will be applied as general tithes and offerings by the Friendship Missionary Baptist Church to my annual contribution statement.

DEPOSITORY (YOUR BANK NAME)

BRANCH

CITY/STATE/ZIP CODE

TRANSIT/ROUTING #:

ACCOUNT NUMBER:

** Please check the type of account:

Checking

Savings

**

This authority is to remain in full force and effect until FMBC has received written notification from me (or either of us) of its termination in such time and in such manner as to afford FMBC and DEPOSITORY a reasonable opportunity to act on it.

DATE:

NAME(S) (Please Print):

SIGNATURE(S):

Please attach a voided check.