

## AUTOMATIC TRANSFER AUTHORIZATION

This is your authorization to The Hometown Savings Bank to withdraw from your account in the amount of \$\_\_\_\_\_\_\_, 202\_\_\_\_\_, 202\_\_\_\_\_ and on the \_\_\_\_\_\_\_ day of each month thereafter and to apply said amount to the credit of the Christian Campus Ministry. I (we) agree to maintain a sufficient bank balance account to cover this authorization, which shall remain in effect until CCM & THSB are notified in writing to discontinue.

Your Bank Name, City, State

Checking or Savings

Account Number

Nine Digit ABA Routing Number

Signature / Date

Printed Name