



CHURCH LOANS & INVESTMENTS TRUST®

# ACH electronic payments

Enroll today-PLEASE PRINT LEGIBLY

Church Loans & Investments Trust  
5305 W Interstate 40  
Amarillo, TX 79106-4759  
Fax: 806-358-1430  
Phone: 806-358-3666  
cbednarz@churchloans.com

1. Complete the authorization below.
2. Attach a voided check.
3. Send both the authorization and voided check back to us either by mail, fax or scanned email to the address at the left.

## Bank Account Information

Name of Bank \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Routing/ABA # \_\_\_\_\_  
 Account # \_\_\_\_\_

Name on bank account \_\_\_\_\_

## Shareholder Information

Name \_\_\_\_\_  
 Title of account \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 e-mail address \_\_\_\_\_  
 Shareholder account # \_\_\_\_\_ Phone \_\_\_\_\_

Apply to all related accounts  No  Yes

Comments \_\_\_\_\_

## Authorization

- I hereby authorize Church Loans & Investments Trust to make periodic deposits (dividend payments) to the indicated bank account.
- I agree that this is a continuing authorization.
- I agree to notify Church Loans & Investments Trust in writing of any changes in my account information or termination of this authorization 30 days prior to the next scheduled deposit to the account.
- I guarantee and warrant that I am the legal duly authorized check signer on the above account and that I am legally authorized to enter into this agreement with Church Loans & Investments Trust.

Signature of  
 account owner \_\_\_\_\_ Date \_\_\_\_\_

Printed name \_\_\_\_\_