



COLUMBIA UNION REVOLVING FUND (CURF) AUTHORIZATION FOR ACH TRANSFER

- ☛ Please note a CURF staff member will call you to verify your information before processing your request.
- ☛ Please provide a bank letter for us to keep on file for future use.

Individual or Entity Name:	
Address:	
City/State:	Zip Code:
Phone Number:	Email Address:
CURF Investment/Loan Number:	

I hereby authorize Columbia Union Revolving Fund of Seventh-day Adventists (CURF) to initiate credit entries to my [] **Checking Account** or [] **Savings Account** indicated below, and the depository named below to credit the same to such account.

Banking Information	
<input type="checkbox"/> Check box, if banking information is already on file.	
Depository Financial Institution:	Amount:
Address:	
City/State:	Zip:
Routing #:	Account #:
NOTE: Please verify with your banking institution that you have the correct ACH routing number. It may differ from what is located on your check. Also provide a bank letter for CURF to add to your file for future use.	
Disclaimer and Signature	
Disclaimer:	This authorization is to remain in full force and effect until CURF has received written notification from me of its termination in such time and in such manner as to afford CURF and the Depository mentioned above a reasonable opportunity to act on it. I understand that (30) days' notice in writing, to CURF is required if I change banks and/or accounts.
Print Name:	
Signature: <small>(digital signatures not accepted at this time)</small>	
Date:	
For Office Use Only	
Verified by:	Date: