

John Dwight Stevens, Chairman P.O. Box 58 Aberdeen, MS 39730

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Rebuilding History to Secure Our Future

## **AUTHORIZATION AGREEMENT FOR DIRECT PAYMENTS (ACH DEBITS)**

Name:		
entries to my (our) checking institution named below hereaft	er called BANK, and to debit the same	inafter called S.A.L., to initiate debt lect one) indicated below at the financial e to such account, I (we) acknowledge mply with the provisions of U.S. Law.
Name of Bank:		
City:	State:	Zip:
Routing Number:	Account Number:	
Dues: \$120.00 per year payab	le by check or bank draft	
\$120	yearly \$10 monthly	
checl	k enclosed bank draft	
	on in such time and in such manner as	s received written notification from me to afford S.A.L. and BANK a
(Signature)		(Date)
Return to:		
Carol Wright		
Save Aberdeen Landmarks Gro	up, Inc.	
P.O. Box 58	• /	
Aberdeen, MS 39730	A 501 (c)(3) Organization	
662-369-2200	<b>Taxpayer ID: 208727443</b>	
(or for further information call	662-369-5257 or 662-369-9301)	

## PLEASE PROVIDE VOIDED CHECK HERE.