Automatic Bank Withdrawal/Transfer-Authorization Agreement

I hereby authorize BANK OF AMERICA, on behalf of Shiva Vishnu Temple, to initiate monthly withdrawals from my

[ ] Checking [ ] Savings account (select one) indicated below,

and the financial institution named below to withdraw from such account.

Deposited To: BANK OF AMERICA - ABA#: 122000661 -- Acc. #:1102940428.
La Jolla – 92122

Donor Information:

Donor Name(s):_____
Address:_____ State:___ ZIP:_____
Phone:_____Email:_____

Donation For: Pillar **[ ]** General/Pledge **[ ]** Temple Construction **[ ]** Membership **[ ]**

Your Financial Institution Information:

Please include a voided check. For savings account only complete the next four lines.

Institution Name:_____
Address:_____
Routing/ABA #: _____
Account No.:_____

Amount Per Transfer: $_____ (must be $25 or more per transfer)
Total Number of Transfers (months): **[ ]** 12, **[ ]** 24, **[ ]** 36, **[ ]** 48, **[ ]** 60, **[ ]** other ___
Start Date: _____(mm/dd/yy) Day of month for Transfer:_____ (mm/dd/yy)

_____ DATE:_____
(Signature of Account Holder)
_____ DATE:_____
(Signature of Joint Account Holder)

Please mail this completed form to:

Shiva Vishnu Temple, 7930 Arjons Drive, Suite B San Diego 92126.

Please include: voided Check below