



ROSALIN MANDELBERG, SENIOR RABBI

JENNIFER RUEBEN, CANTOR

LAWRENCE A. FORMAN, RABBI EMERITUS

Please HELP us by signing up for monthly or quarterly payments from your checking account (preferred) or with a credit card.

Automatic Draft (ACH)

The undersigned ("Payor") hereby authorizes Ohef Sholom Temple (OST) to make withdrawals by Automated Clearing House ("ACH") debit entries from Payor's checking/savings account that is on file at Ohef Sholom Temple, an authorized Bank to withdraw the amount of each such debit entry received by Bank from such account.

\$_____ on the 15th of each month

\$_____ on the 1st of each quarter (June, September, December & March)

Please return with a voided check.

Payor agrees that each such debit entry initiated by OST shall be processed in accordance with and subject to all applicable national and local ACH agreements, rules, and regulations, ("ACH Rules and Regulations") and that this Authorization shall remain in full force and effect until Payor has given, and OST has received, written notification of revocation in such manner and in sufficient time to enable OST and Bank reasonable opportunity to effect such revocation. Payor further agrees that OST may provide copies of this Authorization, any revocation of this Authorization, and any affidavits executed in connection therewith, to Bank, to the person initiating such debit entries on behalf of OST, and to other persons in accordance with applicable ACH Rules and Regulations.

Automatic Credit Card Payment*

I would like to pay with the following credit card:

Mastercard VISA

Card Number: _____

Expiration: _____ 3 Digit Security code on Back of Card: _____

**A 3% Service Charge will be added to your total on all credit card charges*

By checking this box I give OST permission for my ACH or Credit Card payments to be adjusted according to my current balance due and my selected payment options (Quarterly/Monthly)

Printed Name: _____ Date _____

Signature: _____