



DIRECT DEPOSIT FORM

Filling out this form will enable you to receive your monthly check much earlier than receiving it by conventional mail. It takes approximately 24-48 hours from our closing for the check to be posted to your bank account.

AGUSM Account Name: _____

Account Number: _____

Bank Name: _____

Bank Address: _____

Bank Phone # : _____

(please provide the number of the local branch)

Your Bank Account Number: _____

Your Bank Routing Number: _____

(You will need to call your bank for this information)

- I want this to go to savings account.
- Please begin my monthly disbursement for _____ month end.
- I am not ready to receive disbursements at this time, and will contact AGUSM Finance when I am ready.

This form must be received by the 25th of the month for the change to go into effect for the current month end disbursement. Changes received after the 25th will be held until the following month.

AGUSM Finance Office Use:
Verified with Bank: <input type="checkbox"/>
Update USMIA: <input type="checkbox"/>
Initials/Date: _____

Return form to:
Assemblies of God U.S.
Missions-1445 N Boonville
Ave-Springfield, MO 65802
Fax: (417)873-9734 E-Mail:
agusmfinance@ag.org