



Grand Lodge Free & Accepted Masons of WI

Direct Deposit Agreement Form for GLoW Officers

Authorization Agreement

Name _____ MORI # _____

I hereby authorize Grand Lodge Free & Accepted Masons of WI to initiate automatic deposits to my account at the financial institution named below. I also authorize Grand Lodge Free & Accepted Masons of WI to initiate, if necessary, debit entries and adjustments from this account in the event that a credit entry is made in error.

Further, I agree not to hold Grand Lodge Free & Accepted Masons of WI responsible for any delay or loss of funds due to incorrect or incomplete information supplied by me or by my financial institution or due to an error on the part of my financial institution in depositing funds to my account.

This agreement will remain in effect until Grand Lodge Free & Accepted Masons of WI receives a written notice of cancellation from the lodge or financial institution, or until I submit a new direct deposit form to the Grand Lodge.

Account Information

Name of Financial Institution: _____

Routing Number: _____

Account Number: _____ Checking Savings

Signature

Authorized Signature (Primary): _____ Date: _____

Authorized Signature (Joint): _____ Date: _____

Please include a voided check & return this form to Christina@wisc-freemasonry.org