

***Please Use This Form To Authorize Employee Payroll Deduction***

## **Annual Fund Drive ACH AUTHORIZATION**

I hereby request and authorize my employer to send \$\_\_\_\_\_ per each pay period by ACH to Consumers Professional Credit Union (CPCU) for deposit to the account of Battle Creek Area Catholic Schools Foundation.

Funds are to be deposited in the [Annual Fund Drive](#) account:

[Routing # 272482003](#)

[Account # 23298011](#)

This authorization is revocable by me upon written notice to the employer, or upon termination of my employment.

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

C: Battle Creek Area Catholic Schools Foundation

***Please provide this request form to your employer. Mail or fax a copy to the BCACS Foundation at 63 North 24<sup>th</sup> Street, Battle Creek, MI 49015. Fax 269-963-3917.***