



Southern California Conference

Office of the Treasurer

1535 E. Chevy Chase Drive Glendale, CA 91206-4107 P.O. Box 969 Glendale, CA 91209-0969 Telephone: 818•546•8400 Fax: 818•546•8430

December 27, 2017

Dear Pastor, Treasurer, Principal and others,

I pray this letter finds you in good health and that all ministries in your church are thriving with God's grace and strength with the efforts of His people.

Find enclosed the Direct Debit or ACH Debit form to enroll and facilitate electronic payments for business with the office on behalf of each individual church, school, or entity that makes the Southern California Conference. It provides enrollment in the four types of accounts each entity may have.

REQUIRED:

Payroll: Salary, payroll taxes, and benefits (i.e. Healthcare, Retirement, etc.) associated with each employee that is locally hired and funded. It is required each organization be enrolled in Direct Debit or ACH Debit to fund the locally hired employees by action of the Budget & Finance and Executive Committees in October of 2016.

OPTIONAL:

Remittance – Tithe & Offering: Donations received at the church

Property Tax: Assessments for fees, dues or services assigned by county assessors

General A/R: This is for all other business (i.e. Insurance, Teacher Billing, other miscellaneous items)

This allows for each entity to be responsible and accountable for the expenses generated by each location in the Southern California Conference and protect the utilization of funds as agreed by the united body.

We are glad to serve each church, school and other entities that make up the Southern California Conference as together in Christ we can accomplish more than separate. Many blessings to each of you and the ministries you lead.

Sincerely,

Orville Ortiz
Treasurer/CFO

Authorization Agreement for Automatic Payments (ACH Debits)

The (name of local institution)	hereby authorizes
the Southern California Conference of Seventh-day Adventists to financial institution named below for processing:	o initiate debit entries from the depository
□ Payroll - Required □ Remittance – Tithe & Offe □ Property Tax □ General A/R – (i.e. Insuran	ring ace, Teacher Billing, and other)
Account Type: Checking Savings	
Bank Name: Bank Branch: _	
Bank City/State:	_
Name on Account:	_
Account Number:	Routing Number Account Number
ABA Routing Number:	222222222 :000 111 555 1027
This authority is to remain in full force and effect until Southern notification from the Church or School Board of its termination. notified in writing of any changes in the account information or business days prior to the next ACH date. In the case of an ACH T (NSF), the Southern California Conference may charge the bank Today's Date: Committee Action of the conference of the committee Action of the c	Southern California Conference will be termination of this authorization at least 15 Fransaction rejected for Non-Sufficient Funds
By:x	
Print Name Signature	Title
Treasurer's Email: Treasure	r's Phone:
Notes: * Please print or type * The form must be signed by at least two people, one w	rith signature authority on the account

PLEASE RETURN COMPLETED FORM TO THE ACCOUNTING DEPARTMENT, WITH A COPY OF A VOIDED CHECK, AND COPY OF CHURCH OR SCHOOL MINUTES APPROVING THIS AGREEMENT.

* A minimum of 15 business days is required for implementation or revocation of this agreement

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* Keep a copy of this form for your records