



# SAINT NICHOLAS GREEK ORTHODOX CHURCH

3109 Scio Church Road, Ann Arbor, MI, 48103 · Tel.: (734) 332-8200 · Fax: (734) 332-8201 Rev. Fr. Nicolaos H. Kotsis  
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## Saint Nicholas Stewardship Direct Deposit Request

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Bank Name: \_\_\_\_\_

Routing Number: \_\_\_\_\_ Account Number: \_\_\_\_\_

(If available, please provide a VOID check to confirm bank information)

Type of account: Checking: \_\_\_\_\_ Savings: \_\_\_\_\_ Other (please specify): \_\_\_\_\_

Amount: \$ \_\_\_\_\_

Recurring:

Monthly: \_\_\_\_\_ (first business day of month)

Quarterly: \_\_\_\_\_ (first business day in Jan, Apr, Jul and Oct)

One Time only: \_\_\_\_\_

I hereby authorize Saint Nicholas Orthodox Church to withdraw the specified amount from my bank account as indicated above.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_