



Effective mobilization.

Dear friend and supporter,

Below is the form to authorize our bank to automatically debit your donation to FOCUS from your checking account each month. As you complete this form, please note:

- We will be processing the debits on the 1st and 16th of the month. Please indicate which of these two dates you prefer.
- When we receive the completed form, it will take at least 7 business days to process your request before we are able to deduct the first debit.
- Please return the completed form along with a voided check to:
FOCUS International
PO Box 8586
Wichita, KS 67208-0586

To stop your ACH deduction, please contact the FOCUS office at thefocusoffice@onefocuslink.com or 316-618-8268. Federal banking regulations require at least 3 business days to process these requests.

Thank you for partnering with us to reach the nations! We are grateful for your generous gifts and prayers toward God's work among the students and peoples of the world.

Sincerely,

The FOCUS Staff



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Direct Debit Authorization

I hereby authorize Focus International, Inc. to initiate debit entries to my account indicated below. I acknowledge that the origination of ACH transactions from my account must comply with the provisions of U.S. law.

(Your Financial Institution Name)

(Your Financial Institution's Address) (City/State) (Zip)

(Routing Number) (Account Number) Type of Acct: ___ Checking ___ Savings

I authorize Focus International to debit the above account in the amount of _____
every _____ (month, year, etc) on the _____ 1st or _____ 16th starting on
_____.

This authority is to remain in full force and effect until Focus International, Inc. has received written notification from me of its termination in such time and manner as to afford Focus International, Inc. a reasonable opportunity to act on it.

(Print Individual Name)

(Signature)

(Date)

PLEASE ATTACH COPY OF DEPOSIT SLIP OR VOIDED CHECK TO THIS FORM