

# AUTHORIZATION FORM

Unitarian Universalist Congregation of Marin

ES11680

FOR OFFICE USE ONLY	DONOR #	DATE
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Effective date of authorization: \_\_\_\_\_

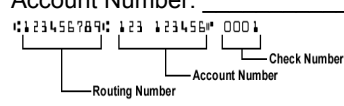
Type of Authorization Form:

<input type="checkbox"/> New Authorization	<input type="checkbox"/> Change banking information
<input type="checkbox"/> Change donation amount	<input type="checkbox"/> Discontinue electronic donation
<input type="checkbox"/> Change donation date	

Last Name	First Name
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Address

City	State	Zip
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Please debit my donation from my: (check one) <input type="checkbox"/> Checking Account (attach a voided check below) <input type="checkbox"/> Savings Account (contact your financial institution for Routing #)	Routing Number: _____ <i>Valid Routing # must start with 0, 1, 2, or 3</i>  Account Number: _____ 
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<b>DONATION START DATE:</b> ____/____/____  <b>DONATION END DATE:</b> ____/____/____	<b>FREQUENCY OF DONATION:</b> <input type="checkbox"/> Monthly on the 1 <sup>st</sup> <input type="checkbox"/> Monthly on the 15 <sup>th</sup> <input type="checkbox"/> Quarterly <input type="checkbox"/> Annually <input type="checkbox"/> One-time	<b>FUNDS AND AMOUNTS:</b> <input type="checkbox"/> Pledge \$ _____ <input type="checkbox"/> Homeless \$ _____ <input type="checkbox"/> Minister's Discretionary \$ _____ <input type="checkbox"/> Unrestricted Gift \$ _____ <input type="checkbox"/> Other _____ \$ _____  <div style="text-align: right;"><b>TOTAL</b> \$ _____</div>
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<b>ONE-TIME CONTRIBUTIONS:</b> <input type="checkbox"/> Fall Homeless Appeal <input type="checkbox"/> Christmas Offering <input type="checkbox"/> Other _____	\$ _____ \$ _____ \$ _____	Date to be transferred ____/____/____ Date to be transferred ____/____/____ Date to be transferred ____/____/____
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**AGREEMENT**

I authorize the above church and Vanco Services, LLC to process debit entries to my account. I understand that this authority will remain in effect until I provide reasonable notification to terminate the authorization.

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