

AUTHORIZATION FORM

Unitarian Universalist Church of Concord

ES16130

FOR OFFICE USE ONLY	ENVELOPE/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	
Address		
City	State	Zip
Email Address		
Please debit my donation from my (check one):		Routing Number: _____
<input type="checkbox"/> Checking Account (attach a voided check below)		Valid Routing # must start with 0, 1, 2, or 3
<input type="checkbox"/> Savings Account (contact your financial institution for Routing #)		Account Number: _____
		<small>⑆ 234567890 ⑆ 23 ⑆ 23456 ⑆ 000 ⑆ └─── Routing Number ───┘ └─── Account Number ───┘ └─── Check Number ───┘</small>
DATE OF FIRST DONATION: ____/____/____	FREQUENCY OF DONATION: (check only one) <input type="checkbox"/> Monthly on the 20 th <input type="checkbox"/> One-time Contribution	DESIGNATED AMOUNT: <input type="checkbox"/> Pledge \$ _____
AGREEMENT I authorize the above church 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: _____		

Please attach voided check here.