

# AUTHORIZATION FORM

Unitarian Universalist Church of Eugene

FOR OFFICE USE ONLY	ENVELOPE/DONOR #	DATE
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Effective date of authorization: _____		
Type of Authorization:		
<input type="checkbox"/> New Authorization	<input type="checkbox"/> Change banking information	<input type="checkbox"/> Change donation amount
<input type="checkbox"/> Change donation date	<input type="checkbox"/> Discontinue electronic donation	
Last Name	First Name	
Address		
City	State	Zip
Email Address		
<b>DATE OF FIRST DONATION:</b> ____/____/____	<b>FREQUENCY OF DONATION:</b> (check only one) <input type="checkbox"/> Monthly on the 1 <sup>st</sup> <input type="checkbox"/> Monthly on the 15 <sup>th</sup>	<b>FUNDS AND AMOUNTS:</b> <input type="checkbox"/> General/Operating \$ _____ <input type="checkbox"/> Capital Campaign \$ _____  <b>Total \$ _____</b>
<b>CHECKING / SAVINGS</b>	Please debit my donation from my (check one): <input type="checkbox"/> Savings Account (contact your financial institution for Routing #) <input type="checkbox"/> Checking Account (attach a voided check below)	Routing Number: _____ <b>Valid Routing # must start with 0, 1, 2, or 3</b>  Account Number: _____ <small>⋮⋮ 23456789 ⋮⋮ 23 123456 ⋮⋮ 000 ⋮ └─── Routing Number      └─── Account Number      └─── Check Number</small>
	I authorize the above organization and Vanco Services 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: _____	
<b>CREDIT CARD</b>	Please charge my donation to my (check one): <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> American Express <input type="checkbox"/> Discover Card	
	Credit Card Number: _____	Expiration Date: _____
	Name on Card: _____	
	Billing Address (if different from above): _____	
	I authorize the above organization and Vanco Services to charge my credit card in accordance with the information above.  Signature (as it appears on the credit card): _____ Date: _____	
<input type="checkbox"/> <b>Optional</b> – pay additional percentage to defray credit card processing fee \$ _____ 2.75% MasterCard, Visa, Diners Club, Discover 3.50% American Express		