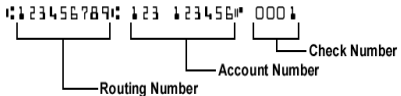


EFT / CREDIT CARD AUTHORIZATION FORM

Unitarian Universalist Congregation of Northern Chautauqua – PO Box 11, Fredonia NY 14063

FOR OFFICE USE ONLY	ENVELOPE/DONOR #	DATE																						
Effective date of authorization: ____/____/____ Type of authorization: <input type="checkbox"/> New authorization <input type="checkbox"/> Change donation amount <input type="checkbox"/> Change donation date <input type="checkbox"/> Change banking information <input type="checkbox"/> Discontinue electronic donation																								
Last Name		First Name																						
Address																								
City		State Zip																						
Email Address																								
DATE OF FIRST DONATION: ____/____/____ <input type="checkbox"/> Continue my Operating Fund pledge until further notice. <input type="checkbox"/> Continue my Operating Fund pledge until ____/____/____ <input type="checkbox"/> Continue my Building Fund pledge until ____/____/____	FREQUENCY OF DONATION: <input type="checkbox"/> Weekly each Monday <input type="checkbox"/> Monthly on the 1 st <input type="checkbox"/> Monthly on the 15 th <input type="checkbox"/> Semi-Monthly on the 1 st & 15 th	<table style="width: 100%;"> <tr> <td style="width: 50%;">FUNDS:</td> <td style="width: 50%;">AMOUNTS per period:</td> </tr> <tr> <td><input type="checkbox"/> General/Operating</td> <td>\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Building Fund (Newman Center)</td> <td>\$ _____</td> </tr> <tr> <td colspan="2" style="text-align: right;">Total from above</td> </tr> <tr> <td colspan="2" style="text-align: right;">\$ _____</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Optional (card donations only):</td> </tr> <tr> <td colspan="2">Add an additional 2.75% to defray card processing fees</td> </tr> <tr> <td></td> <td style="text-align: right;">x 2.75%</td> </tr> <tr> <td></td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td colspan="2" style="text-align: right;">Grand total</td> </tr> <tr> <td colspan="2" style="text-align: right;">\$ _____</td> </tr> </table>	FUNDS:	AMOUNTS per period:	<input type="checkbox"/> General/Operating	\$ _____	<input type="checkbox"/> Building Fund (Newman Center)	\$ _____	Total from above		\$ _____		<input type="checkbox"/> Optional (card donations only):		Add an additional 2.75% to defray card processing fees			x 2.75%		\$ _____	Grand total		\$ _____	
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CHECKING / SAVINGS	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: _____ Valid Routing # must start with 0, 1, 2, or 3 Account Number: _____ 																						
	I authorize the above organization 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: _____																							
CREDIT / DEBIT CARD	Card Brand (check one): <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> American Express <input type="checkbox"/> Discover Card																							
	Card Number:	Expiration Date:																						
	Name on Card:																							
	Billing Address (if different from above):																							
	I authorize the above organization to process transactions in accordance with the information above. Signature (as it appears on the card): _____ Date: _____																							

If using a checking account, please attach a voided check over the credit/debit card section above.