AUTHORIZATION FORM

Name of the organization: Unitarian Universalist Fellowship of Northern Nevada

FOR UUFNN OFFICE USE ONLY	ENVELOPE/DONOR #	DATE:

PLEASE COMPLETE FIELDS BELOW:

Effective date of authorization: _____

Type of authorization:
- ◯ New authorization
- ◯ Change Donation Amount
- ◯ Change Donation Date
- ◯ Change Banking Information
- ◯ Discontinue Electronic Donation

Last Name	First Name
Address	
City	State / Zip
Email	

Date of first donation: _____

Date of last donation (optional): _____

Frequency of donation: (please select one)
- ◯ Monthly on the 1st
- ◯ Monthly on the 15th
- ◯ Bi-Weekly (every other week)
- ◯ One Time

Amount of first donation: $_____

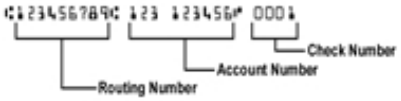
Amount of last donation (optional): $_____

CHECKING / SAVINGS

Please debit my donation from my (check one):
- ◯ Savings Account (contact your financial institution for Routing #)
- ◯ Checking Account (please attach copy of check)

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: /s/ _____ Date:_____

CREDIT / DEBIT CARD

Card Brand (check one): ◯ Visa ◯ MasterCard

Card Number:	Expiration Date:

Name on Card:

Billing Address (if different from above): Same

I authorize the above organization to process transactions in accordance with the information above.

Signature (as it appears on the card): /s/ _____ Date:_____

If you downloaded this form from an email or the UUFNN website, you can fill it out on a computer and save as a new document to your computer, then attach it to an email and return it to stewardship@uufnn.org. If you completed this form in this way:

1. **You can sign it electronically by typing your full name in the signature block after the "/s/."**
2. **If you are using a checking account, please scan a voided check and include it with your email.**

You can also print this form and complete it by hand. If you do this, you can return it in one of two ways:

1. **Scan the completed form and email it to stewardship@uufnn.org. If you are using a checking account please scan a voided check and include it with your email; or**
2. **Mail the completed form to UUFNN at 780 Del Monte Lane, Reno NV 89511. If you are using a checking account, please attach a voided check.**