



Authorization for Automatic Transactions to Bank Account

Per new Department of Justice rules, **all nonprofits are required to sign up for EFT to get paid monthly for donations.** All nonprofits will be paid monthly instead of quarterly once they've switched to EFT payments.

Please complete this form and attach a copy of a voided check* and return to customer.service@uwccr.org.

**If your organization uses a savings account, please submit an official letter from your bank providing your routing number and account number.*

Action Request: START CHANGE CANCEL

Organization Name: _____

EIN #: _____

My Vendor Number in Andar: (listed on your current checks from United Way California Capital Region) _____

Bank Name: _____

Routing Number: _____

Bank Account Number: _____

I hereby authorize United Way California Capital Region (UWCCR) to deposit funds ("Credit") in any amount to my checking and/or savings account ("My Bank Account"), identified above at Bank Name identified above through the Automated Clearing House (ACH) system. I also authorize UWCCR to initiate withdrawals ("debits") from My Bank Account to correct any errors that may have been made with credits to My Bank Account. I authorize My Bank to process these credits to and debits from my bank account. **I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of U.S. law.**

This authorization will remain effective until I give UWCCR written notice to the contrary and UWCCR has had a reasonable period of time to act on that notice. My revocation of UWCCR's authority to initiate credits to my bank account will not affect UWCCR's right to initiate debits to My Bank Account to correct or adjust a credit processed before my revocation of authority has become effective.

I warrant to UWCCR and to UWCCR's Bank that:

- Only my signature is needed on this authorization to make it effective for My Bank Account.
- Everyone whose signature is needed on this authorization to make it effective for My Bank Account has signed it.

Date: _____

Date: _____

Signature: _____

Signature: _____

Printed Name: _____

Printed Name: _____

Title: _____

Title: _____

UWCCR INTERNAL USE ONLY

Entered By: _____

Date Entered: _____