

Authorization Form for Recurring Donation via Electronic Check

Use this form to set up a recurring donation subscription that automatically charges your checking or savings account as electronic check transactions. Please print the form, fill it out, and mail it to the address at the bottom. You may cancel your recurring donation at any time by contacting us.

IF YOU ARE UPDATING AN ALREADY EXISTING RECURRING DONATION, please check here:

(Check the box if you are changing the bank number, account number, the amount of your donation, etc. If possible, please enclose a printout of one of your transaction receipts, which you should have received by email).

You have the option of donating to one of two organizations - Move to Amend, or the Move to Amend Education Fund. Only gifts to the Education Fund are tax-deductible. Individuals who want to support Move to Amend's lobbying and legislative activities should donate to Move to Amend, which will *not* be tax-deductible. For more information, please see http://movetoamend.nationbuilder.com/tax_deduction_note.

Which organization would you like to donate to? (select one)

- Move to Amend, a 501(c)4 organization (NOT tax-deductible)
 The Move to Amend Education Fund, administered by Democracy Unlimited, a 501(c)3 organization (tax-deductible)

DONATION INFORMATION

I, _____, authorize the organization selected above (henceforth referred to as "the organization") to bill the bank account listed below as a recurring donation to the organization, according to the specifications indicated on this form.

Donation amount: \$ _____ (USD) **Frequency (check one):**
 Monthly donation Quarterly donation

The initial transaction will occur on the day that the organization receives this form.

Recurring donations will continue until (check one):

- no end date (*i.e.* - until I cancel by contacting the organization)
 ____ / ____ / ____
 MONTH DAY YEAR

BANK ACCOUNT INFORMATION

Account Holder's Name (as it appears on this bank account): _____

Billing Address: (Number & Street): _____

(City, State & Zip): _____

Bank Name: _____ Bank's ABA Routing Number: _____

Bank account number: _____ Account Type (check one):

- Checking Savings

Check here if this is a business account:

Donor's Phone number: _____ Donor's Email address: _____

Donor's Signature: _____ Date: _____

**Please mail this form (completed and signed) to:
Move to Amend P.O. Box 188617 Sacramento, CA 95818**

NOTE: Donations to the Education Fund will appear on your bank statement as charges from Democracy Unlimited of Humboldt County. You may cancel a recurring donation at any time by contacting Paul at 707-616-0501 or by email at donations@movetoamend.org. **THANK YOU!**