ELECTRONIC FUNDS TRANSFER (EFT) AUTHORIZATION



Sign up for EFT to get paid monthly for donations through United Way/Our Promise Workplace Campaigns.

Nonprofits that sign up for EFT will be paid monthly as opposed to quarterly checks.

Please complete this form and attach a copy of a voided check.

Please email both items to <u>customer.service@uwccr.org</u>.

United Way California Capital Region



EFT ACTION REC	QUESTED 🕨 🔲 st	TART	CI	HANG	E	C	ANC	EL	VE	NDOF	R #	
Your vendor number is listed above your org name on your check. EFT INFORMATION												
LI I INI UNMATIUI	NAME											
NONPROFIT	ADDRESS											
	CITY/STATE/ZIP											
	SSN			_			_					(9 DIGITS)
	TIN/EIN		_								(9 DIGITS)	
PRIMARY EFT CONTACT	NAME											
	ADDRESS											
	PHONE NUMBER											
	EMAIL											
FINANCIAL INSTITUTION	NAME											
	ROUTING NUMBER								(9 DIGITS)			
ACCOUNT	NUMBER											(10-12 DIGITS)
	TYPE	C	HECKING	G [] SA\	/INGS	*					
AUTHORIZATION Please attach a copy of a voided check. *If your organization uses a savings account with checks, please submit an official letter from your bank providing your routing number and account number.												
SIGNATURE			DAT									ATE
PRINTED NAME												
TITLE												

Please email this completed form and a copy of a voided check

customer.service@uwccr.org
Subject: EFT Sign-Up

QUESTIONS?

DATE:

CALL (916) 368-3013 YourLocalUnitedWay.org OurPromiseCA.org

INTERNAL USE ONLY ENTERED BY: