

Authorization for Direct Debit

I (We) hereby authorize Friends of the Animal Center Foundation (hereinafter called Company) to initiate Debit entries to my (our) account(s) indicated below and the depository financial institution named below (hereinafter called Depository) to debit the same to such account. I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with provisions of U.S. law.

Depository Name:		Branch:	
City:		State:	ZIP:
Routing Number:		Account Number:	
Checking Account	Savings Account		
Choose date of transact	ion:		
\Box 1 st Monthly	\Box 15 th Monthly		
Amount of donation:			
Start date:	End date:		
			en notification from me (or either of pository a reasonable opportunity
Name(s):			
Signature:		D	ate:
Address:		P	hone:

Please attach a **Voided Check** here.