

UNSHELTERED INTERNATIONAL DEBIT AUTHORIZATION

I (we) hereby authorize Unsheltered International, herein after called Company, to initiate debit entries to my (our) account indicated below and the financial institution named below, hereinafter called Financial Institution, to debit the same to such account for donations. I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of U.S. law.

Financial Institution \_\_\_\_\_ Branch \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Routing Number \_\_\_\_\_ Account Number \_\_\_\_\_

Type of Account: \_\_\_\_\_ Checking \_\_\_\_\_ Savings

Amount (or how amount is determined): \_\_\_\_\_

Frequency (Weekly, Monthly etc.): \_\_\_\_\_ Start Date (if recurring): \_\_\_\_\_

Date of Debit (s): \_\_\_\_\_

If the debit is recurring and the date of the debit falls on a non-banking day, the debit will hit your account on the next banking day and will not hit your account prior to the authorized date.

This authority is to remain in full force and effect until Company has received written notification from me of its termination in such time and manner as to afford Company and Financial Institution a reasonable opportunity to act on it.

Print or Type Individual Name \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_