**YES! I want to be a sustainer!**

**Minnesota Literacy Council Monthly Giving Authorization Form**

|  |  |  |
| --- | --- | --- |
| **FOR OFFICE USE ONLY** | DONOR #: | EFFECTIVE DATE: |

|  |  |
| --- | --- |
| TO BE COMPLETED BY DONOR |  |
| Type of Authorization: | New Authorization* Change donation amount
* Change donation date
 | Change banking information* Discontinue electronic donation
 |
| Last Name | First Name |
| Address |
| City | State | ZIP |
| Phone | Email |
| **I will give $\_\_\_\_\_\_\_\_ each month on the 15th day, starting in \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.**month  |
|  |
| **Payment Type** (chose one and fill out corresponding section below): \_\_\_\_\_ Checking or Savings Account \_\_\_\_\_ Credit card |
| **CHECKING / SAVINGS** | Please debit my donation from my (check one):* Savings Account (contact your financial institution for Routing #)
* Checking Account

(staple a voided check over credit card section below) | Routing Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*Valid Routing # must start with 0, 1, 2, or 3*Account Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| I authorize the Minnesota Literacy Council and Vanco Services, LLC to process debit entries to my account. I understand that this authority will remain in effect until I provide reasonable notification to terminate the authorization.Authorized Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| CREDIT CARD | Please charge my donation to my (check one): | Visa | MasterCard | American Express | Discover Card |
| Credit Card Number: | Expiration Date: |
| Name on Card: |
| Billing Address (if different from above): |
| I authorize the Minnesota Literacy Council and Vanco Services, LLC to charge my credit card in accordance with the information above.Authorized Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_ |