

COMMUNITY SHARES OF GREATER MILWAUKEE DONOR ELECTRONIC TRANSFER FORM

By signing this form and returning it to Community Shares of Greater Milwaukee, you will establish a standing authorization to request electronic funds transfers between Community Shares and your account at your bank or other financial institution.

To begin enjoying the convenience of donor electronic transfer, please:

- Complete all sections of this enrollment form and sign where indicated.
- Attach a pre-printed, canceled or voided check as indicated in Section 3.
- **Mail to:** Community Shares of Greater Milwaukee
1845 N. Farwell Ave., Ste. 102
Milwaukee, WI 53202

Section 1. DONOR INFORMATION

Name (please print):			
Address:			
	City:	State:	Zip:
Telephone:		E-mail Address:	
Name of Bank/Other Financial Institution:		Authorizing Signature:	

Section 2. TRANSFER INSTRUCTIONS

I want to set up recurring transfers. Recurring transfer amount \$ _____

Check one and indicate start month (processed on 25th of month).*

Monthly beginning _____ Quarterly beginning _____

*If this form is not received in time to make the first requested transfer date, we'll start on the next transfer date in the sequence. For example, if you ask us to begin monthly transfers in June and we receive your form after June 25, we'll start the transfer on July 25 instead.

Section 3. BANK/OTHER FINANCIAL INSTITUTION INFORMATION (Required).

Attach a pre-printed, canceled or voided check to ensure proper routing. Other acceptable documentation for accounts without checks include a letter from your financial institution, signed by an officer, which includes account title, account number, account type, and ABA Transit Routing Number.

Attach an Original Voided Check Here (Required).
Originals only, no photocopies.

This authorization may be terminated by any of the parties in writing at any time.