



***Make Your Monthly Donations Easier by Electronic Funds Transfer***

Your Name (as it appears on your bank statement) \_\_\_\_\_

Bank Name \_\_\_\_\_ Account Number \_\_\_\_\_

This account is a  Checking  Savings (please check one)

Bank Routing/ABA Number: \_\_\_\_\_ (9 digit number on bottom of check)

Your gift will be deducted on the first of the month unless otherwise directed.

Amount to be transferred each month \$ \_\_\_\_\_

**Authorization For Automatic Withdrawal**

I understand that my future monthly gifts will be transferred directly from my banking account. This automatic contribution is completely voluntary and I may change or end my participation at any time. If at any time I wish to increase, decrease or suspend my giving, I can email Questscope at [infous@questscope.org](mailto:infous@questscope.org), send a written request to 615 1<sup>st</sup> Avenue NE Suite 500 Minneapolis, MN 55413, or phone **612.607.6488**.

**SIGNATURE** \_\_\_\_\_ **DATE** \_\_\_\_\_