



**Resource Exchange International, Inc.  
Electronic Funds Transfer Authorization Form**

**Donor Information**

Donor Name \_\_\_\_\_  
Address \_\_\_\_\_  
City, State, Zip \_\_\_\_\_  
Daytime phone number where we can reach you if we have any questions:  
\_\_\_\_\_ This is my **work** or **home** number. (Circle one)

**Bank Information**

Your Bank's Name \_\_\_\_\_  
Full Address \_\_\_\_\_  
\_\_\_\_\_ Phone # \_\_\_\_\_

**I am enclosing a voided check with this form.**

- The withdrawals will be made from my checking account  
My checking account number is: \_\_\_\_\_  
My bank's routing number is \_\_\_\_\_
  
- The withdrawals will be made from my savings account  
My savings account number is \_\_\_\_\_  
My bank's routing number is \_\_\_\_\_

**Donor Designation and Authorization**

**Choose One:**

- I will be giving gifts monthly until I notify REI to stop the EFT
- OR**
- I will be giving monthly until \_\_\_\_\_ (date of last withdrawal)

Please designate my gift monthly as follows:	Amount per Month:
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

**TOTAL MONTHLY DEDUCTIONS:** \_\_\_\_\_

I/We hereby authorize REI (Resource Exchange International, Inc.) to transfer the amount shown from the indicated account on the **5th** or the **22th** of each month.

**Please circle which date you prefer.**

If the date falls on a weekend or holiday it will be deducted on the next business day.

\_\_\_\_\_  
Donor Signature (both signatures required on joint account)

\_\_\_\_\_  
Donor Signature (both signatures required on joint account)

**Return to: REI, Inc. 5446 N Academy Blvd Suite 202, Colorado Springs, CO 80918 USA**