

United Way of Greater Cincinnati
Vendor's Authorization Agreement
For Automatic Deposit

Please complete form and return to Kristin Mahler, Accounting Manager
Mail to: 2400 Reading Road, Cincinnati, OH 45202
Fax: (513) 762-7146
Email: kristin.mahler@uwgc.org

Section 1

A. Type of Transaction ☐ Add ☐ Change ☐ Delete

B. _____
Name of Agency Fed Tax ID Number Telephone

C. _____
Address City State Zip

D. _____
Contact Person Email Address

Section 2

A. _____
Financial Institution Telephone

Address City State Zip

B. _____
9 Digit Transit Routing/ABA Number Type of Account
 ☐ Checking
 ☐ Savings
C. _____
Account Number ☐ Depository

We hereby authorize United Way of Greater Cincinnati to initiate credit entries to our account in the financial institution identified above and also debit entries, if necessary, for any credit entries that are determined to be in error. We additionally authorize the financial institution to credit, or debit, the same to our account.

This authority is to remain in effect until revoked by us in writing to United Way of Greater Cincinnati.

Authorized Signature Title

Print Name Date

If you have any questions, contact Kristin Mahler at (513) 762-7238