

Date: ____/____

PAYMENT AUTHORIZATION/AGREEMENT FOR DONATIONS TO KXCI COMMUNITY RADIO

Your recurring sustaining gift, or a one-time gift, through Electronic Funds Transfer to KXCI Community Radio is deeply appreciated. This is the most efficient way you can help KXCI. Please return this completed, signed authorization so we may begin to process your generous donation.

Date:/ to process your generous donation.	, 3
RECURRING SUSTAINING GIFT	
I,, authorize the Fo	undation for Creative
Broadcasting, dba KXCI-FM, to charge my banking account listed below, starti	ing on (date):
/ and on the day of the month for each month follo	wing for the amount of
\$ for (check one of the following):KXCI Membership	KXCI Capital Campaign
ONE-TIME GIFT	
I,, authorize the Fo	undation for Creative
Broadcasting, dba KXCI-FM, to charge my banking account listed below on (da	ate):/ for the
amount of \$ for (check one of the following):	
KXCI MembershipKXCI Capital Campaign	
My account information is as follows:	
Customer's Name (as it appears on Bank account):	
Bank Name:	
Bank Account Type: ☐ Checking ☐ Savings ☐ Business Checking	
Bank ABA Routing Number: (9 digits)	
Bank Account Number:	
This payment authorization is valid and to remain in effect unless I,	notify the
Foundation for Creative Broadcasting, dba KXCI-FM of its cancellation by send	ling written notice to: KXCI
91.3FM, 220 South Fourth Avenue, Tucson AZ 85701.	
Customer Name Printed:	
	Please return in the
Customer Signature:	envelope provided or mail to:
Customer Street Address:	KXCI 91.3FM Community Radio
City: State: Zip:	220 South Fourth Avenue
E-mail:	Tucson AZ 85701