

Automated Giving Authorization Form

(Please print)

I hereby authorize UIM International to arrange automatic deductions from my bank account each month on the day indicated below. (Please check)

5th of the month 20th of the month

I would like to support the ministry of:

Name: _____

Monthly amount: _____

Name: _____

Monthly amount: _____

UIM Aviation Operations fund

Monthly amount: _____

Beginning _____ (month) _____ (year) Total monthly amount: _____

Name _____

Address _____

City _____ State _____ Zip Code _____

Daytime phone _____

Signature _____

(As required on checks for this account)

Date _____

Please print this form, include your gift or a cancelled check and mail it to:

UIM Business and Service Center

P.O. Box 6429

Glendale, AZ 85312-6429