



**Wisconsin Right to Life  
Automated Clearing House (ACH) for Cash Contributions**

I hereby authorize the General Fund of Wisconsin Right to Life, Inc., Company ID Number 39-1150264, hereinafter called WRTL, to initiate debit entries on a monthly basis from my account indicated below and the financial institution named below, hereinafter called DONOR'S BANK, to facilitate the electronic processing of charitable donations to WRTL for the purpose outlined below. This authority is to remain in full force and effect until WRTL has received written notification from me of its termination in such time and in such manner as to afford WRTL a reasonable opportunity to act on it — usually a 30-day period.

**Choose a Monthly Donation Amount:**

- \$5.00 (Minimum)       \$10.00       \$20.00       Other \$\_\_\_\_\_

**Please Print**

Donor Name: \_\_\_\_\_

Donor's Bank Name: \_\_\_\_\_

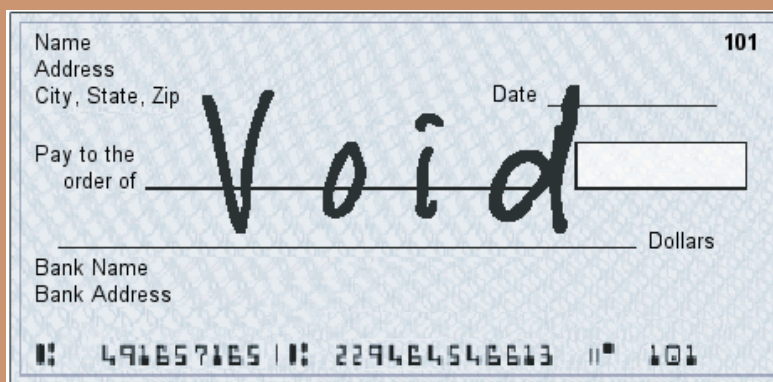
Donor's Bank Street Address: \_\_\_\_\_

Donor's Bank City, State, Zip: \_\_\_\_\_

ACH contributions will be set up with an effective date of the 15<sup>th</sup> of each month. If that date falls on a weekend, or bank holiday, the following business date will be used. There is no fee charged for this service and you will receive a monthly receipt confirming your donation. My signature below certifies my authorization of the above ACH transaction:

Donor Signature: \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_

**A voided check from your checking account must accompany this form.**



Mail this form and your voided check to: Wisconsin Right to Life, 9730 W. Bluemound Rd.  
Suite 200, Milwaukee, Wisconsin 53226-4481 - Attn: Monthly Giving  
If you have questions, please call (414) 778-5780 or toll-free (877) 855-5007.