



Automatic Withdrawal Authorization Form

I _____, Fund Administrator for the _____ Memorial Fund, authorize CHARITYSMITH Nonprofit Foundation to deduct the fees indicated below from the Wells Fargo Bank Account established for this memorial fund.

I authorize the administrative fee of \$240.00 USD to be deducted annually.

I authorize the start-up fee of \$500.00 USD to be deducted after the memorial fund has received at least \$750 USD. Please note: the start-up fee needs to be paid within three months of starting the memorial fund.

I have enclosed the start-up fee of \$500.00 USD in form of a check.

I have paid the start-up fee of \$500.00 USD online at www.charitysmith.org/manageyourfund.

Signature

Date

Printed Name

Title