

United Way of San Diego County  
**Electronic Funds Transfer Form**  
(Preferred Method of Payment)

Agency Name: \_\_\_\_\_ Vendor ID: \_\_\_\_\_ (or EIN Number)

Address: \_\_\_\_\_

Telephone #: \_\_\_\_\_ Fax #: \_\_\_\_\_ Email Address: \_\_\_\_\_

Type of Account:  Checking  Savings  Other

Routing #: \_\_\_\_\_ Account #: \_\_\_\_\_

**\*Please provide a copy of a voided check or an official letter from your bank for verification.**

Authorized Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_ Title: \_\_\_\_\_

**Agency Portal Access (To pull online reports to support payment distributions. An email will be sent once setup is complete.)**

Name of Person Who Should Have Access: \_\_\_\_\_

Email Address: \_\_\_\_\_

Please mail the completed form to:

**EFT Processing**

**United Way of San Diego County**

**4699 Murphy Canyon Rd.**

**San Diego, CA 92123.**

For questions, please contact Donor Services at [donorservices@uwsd.org](mailto:donorservices@uwsd.org). Thank You!