



**WEAC Can Do It**  
 Wisconsin Education Association Council  
 Attn: Torre Edwards  
 PO Box 8003; Madison, WI 53708  
 800-362-8034 x 245  
 edwardst@weac.org

## WEAC CAN DO IT CONDUIT SIGN-UP & EFT AUTHORIZATION FORM

**Please fill out the below information that is required when reporting your WEAC Can Do It contributions:**

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

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

Home City/State/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Home E-Address: \_\_\_\_\_

Occupation: \_\_\_\_\_

Employed by: \_\_\_\_\_

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

Employer City/State/Zip: \_\_\_\_\_

I hereby authorize WEAC Can Do It (WCDI) of the Wisconsin Education Association Council (WEAC) to initiate debit entries to my bank account, to debit the same to such account for the purpose of making a contribution to my WCDI account. My bank shall deduct from my designated account and pay such amounts to WCDI pursuant to this authorization.

This authorization will remain in full force and effect until the WCDI receives written notification from me of its termination in such time and manner as to afford WCDI a reasonable opportunity to act on it. I understand that if I stop payment of any debit to this Authorization, then my voluntary contribution to WCDI will cease without notification. The WCDI will deduct payments on the 5<sup>th</sup> and/or 20<sup>th</sup> of the month, pursuant to this authorization.

I understand that a contribution to WCDI is voluntary and is not a condition of membership in the NEA, WEAC, Region and Local.

Circle Account Type:	Checking	Savings
Bank Name		
Bank City/State		
Bank Phone		
Bank Routing Number (9-digits):		
Bank Account Number:		
Monthly Payment Amount:		
Circle chosen withdrawal date(s):	5 <sup>th</sup> of the month	20 <sup>th</sup> of the month

**Attach a voided check or deposit ticket to this authorization form**, sign and date it, and give to the WCDI representative or mail to WEAC Can Do It Conduit at the address shown above.

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

<b>FOR WEAC USE ONLY:</b> Vendor ID: _____
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