

Enclosed is my gift for the



Name _____ Phone _____

Street Address _____

City _____ State _____ Zip _____

E-mail address _____

Church _____

My **SINGLE GIFT** today is enclosed in the amount of \$ _____.

My **MONTHLY GIFT:**

- I request my bank or credit card company to MONTHLY transfer funds in the amount of \$ _____ (U.S.) until further notice.
- I understand I am in full control of my donation and anytime I wish to make changes I will contact this organization.
- I prefer a monthly transfer on the 1st or the 16th (circle one) starting in _____ (month).

Checking (Attach voided check or use enclosed donation check)

Savings (Attach voided deposit slip)

Card # _____

VISA

MasterCard

Exp. Date _____

Date _____ Giver's Signature (required) _____