



Please complete and mail to: Interserve USA | PO Box 418 | Upper Darby, PA 19082

I am interested in supporting _____

- I would like to send in a **single gift** in the amount of:
 \$ _____ to their () **outfitting** or () **support**.
 My checking account or credit card information is below, or I have enclosed a check.
- I would like to pledge \$ _____ () **monthly*** () **quarterly** () **yearly** (Choose one)

Please complete the following:

Donor name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

*I would like to set up repetitive **monthly** giving in the amount of:
 \$ _____ to be taken from my () Bank Account OR () Credit Card (check one)
 On the () 3rd or () 18th (check one) day of the month beginning _____.
 My bank account or credit card information is below.

EFT/Direct Debit Giving

Please enclose a Voided Check (for EFT only) **or provide the following:**

CHECK TYPE: (circle) Personal/Corporate ACCOUNT: (circle) Checking/Savings

Name as it appears on your Bank Account: _____

Bank Name _____ Routing # _____ Account # _____

Signature Required _____ Date: _____

Credit Card Giving

() Visa () MasterCard () Discover () American Express

Name **AS IT APPEARS** on your Credit Card: _____

Credit Card Number _____ Three-digit code _____

Signature Required _____ Exp. Date: _____