

Monthly Gift Form



Name: _____

Address: _____

City: _____

State: _____ Zip Code: _____

Telephone: _____

Please email me the latest updates from the field and free e-newsletter at:

Email Address: _____

I would like to make an automatic monthly gift of:

\$10 \$15 \$30 \$50 \$Other _____

Option 1: By Credit Card

Please charge my gift each month to:

Visa MasterCard American Express Discover

Credit Card Number _____ Expiration Date _____

Name (as it appears on your credit card) _____

Signature _____ Date _____

Option 2: By Direct Debit

If you would like to pay by direct debit from your checking account each month, please enclose a voided check. Your future monthly gifts will be transferred from your checking account.

Signature _____ Date _____

Thank you for your generosity. All contributions are tax deductible.
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