



The Master's Mission, Inc www.mastersmission.org (828) 479-6873

AUTHORIZATION AGREEMENT FOR AUTOMATIC

WITHDRAWAL OF FUNDS

(CHECKING/SAVINGS ACCOUNT or CREDIT CARD) ES6622

Donor #: _____
(leave blank if not applicable)

Today's Date: _____

Name on Account/Credit Card (please print) _____

Address _____

City _____ State _____ Zip _____

Email Address (required): _____

Phone Number (required): (_____) _____

DONATION INFORMATION

Donation Amount: \$ _____

- Check one: Monthly - Debited on the 5th
 Monthly - Debited on the 20th
 Quarterly - Debited on the 5th day beginning _____ (please specify month to begin)

Please make my ongoing donation effective _____ (date of 1st donation) through _____ (end date if applicable)
(MM/YY) (MM/YY)

- Donation to: Missionary/Project _____
 General Fund

CREDIT CARD - Complete this section ONLY if authorizing payment by Credit Card

Please charge my ongoing donation to my:

- Visa MasterCard American Express Discover Card

Credit Card number _____ Expiration Date _____

Billing Address if Different from Above: _____

I authorize The Master's Mission, Inc to charge my credit card according to the donation information above. The authority will remain in effect until I provide reasonable notification to terminate this authorization.

Signature (as it appears on the credit card): _____ Date: _____

CHECKING/SAVINGS ACCOUNT - Complete this section ONLY if authorizing payment from your checking or savings account

Please debit my ongoing donation from my (check one):

- Checking Account - *attach a voided check*
 Savings Account - *contact your financial institution for the appropriate Routing Number*

Routing number: _____
Valid Routing # must start with 0,1,2, or 3

Account Number: _____

I authorize The Master's Mission, Inc. and Vanco Services, LLC to process debit entries from my account according to the donation information above. I understand that this authorization will remain in effect until I provide reasonable notification of its termination.

Authorized Signature: _____ Date: _____