

Recurring Gift Application

(Electronic Funds Transfer)

Step 1 – Your Billing Information

Name: _____
 Address: _____
 City, State, Zip: _____
 Telephone: _____
 E-mail: _____

E-mail: finance@goresources.info

✓ Save paper and postage
 Questions? Phone: 360-567-3757

✓ Avoid forgetting and mistakes!

✓ No More Checks

✓ Reduce administrative time to process your giving

Mail this application to:

People International
P.O. Box 3005
Vancouver, WA 98668

or send it by fax

Fax: 360-859-4584

Step 2 - Your Account Information

(Select one: checking or savings or credit card)

Checking Account:
Remember to enclose a voided check.
(Deposit slips will not work.)

Savings Account:
 9-Digit Federal Routing Number: _____

(Please check with your financial institution.)

Account # _____

Credit Card:
 Account Number: _____

Expiration: ____/____

Verification Number: _____



⊃ Send a voided check with this application (unless you specify a savings account.)

⊃ The first transfer will occur on the date you specify

⊃ Your bank statement will show the date and amount of your gift.

⊃ A receipt will be eMailed to you showing the amount of your tax deductible gift.

⊃ You may discontinue the Direct Deposit at any time by notifying People International.

Support Designation (Project//General/Worker Fund#)	Monthly Amount
	\$
	\$
	\$
Total Monthly Giving:	\$

Step 3 – Designation & Amount

Preferred date of transfer (check one):

- 5th of each month
- 20th of each month

Date to begin Monthly Giving: ____/____/____

This authorization is to remain in full force and effect until People International has received notification from me of its termination/change request in such time and manner as to afford People International a reasonable opportunity to act on it.

Signature _____

Date _____