

Recurring Donation Form

We would like to process your donation to the **KINGDOM Group** in the most convenient way for you. We are able to offer you two payment methods.

the month. If you would like this option, please provide us the following information:

This method will appear on your credit card bill each month. The deduction will show up around the 1st of

1. Credit Card

Signature: ___

sent in a voided check.

| Amount: \$ | Email: | |
|-----------------------|---|--|
| Name as it appears of | n the card: | |
| Address: | | |
| | | CVV# (code): |
| Expiration date: | Phone | # : |
| Signature: | | |
| | *** | ***** |
| 2. Electronic Fund | s Transfer | |
| This method makes ar | ı automatic deduction from yo | our bank account on the date you specify. If you are |
| using a checking acco | unt, please include a voided c l | neck and provide us the following information: |
| Amount: \$ | Email: | |
| Day of month: | Phone #: | |
| Bank: | | |
| | | |
| Name on account: | | |
| *Routing number: | | |
| Account number: | | |

Thank you for your support in helping to move the cause forward.

*The routing number is located on the bottom of the check. You don't need to complete this if you have