



ELECTRONIC FUNDS TRANSFER FORM

Use this form to arrange automatic monthly donations from your checking, savings or credit account to participate in Shepherd's Staff Mission Facilitators global ministry. **Mail, email or fax this form to one of the addresses listed on the bottom of the page.**

Contact Information	
Name:	Email:
Street:	Phone:
City, State:	Zip Code:

Donation Information

I would like to specifically donate to the work of:

Donation Designation	Account Number	Amount
Missionary's Name:		
Missionary's Name:		
Missionary's Name:		
Missionary's Name:		
General Fund		
Total Monthly Donation		

Payment Information

Transaction Date	
Start recurring transaction in the following month:	Schedule transaction on the following day of the month: () 5th () 10th () 15th () 20th

Electronic Check	
Bank Name:	Account Type: () Checking () Savings
Routing Number:	Account Number:

(please attach a voided check)

Credit Card	
Card Type: () Visa () MasterCard () American Express () Discover	Card Number:
Expiration Month and Year:	Security Code*:

**Security code is the last 3 digits on the back of the credit card and the four digit code on the American Express Card.*

I hereby authorize the above named financial institution or credit card company to make my donation by direct debit to the checking account, savings account or credit card listed above on a monthly basis. I understand that I am in full control of my payment, and if at any time I decide to make any changes or discontinue the EFT service, I will call or write Shepherd's Staff Mission Facilitators, Inc. Change of payment method will not affect other provisions and terms of my contract.

Signature:	Date:
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