

REOCCURRING GIVING

I hereby give my bank permission to transfer these funds from my account to Cornerstone Ranch each month on the day indicated. I understand that this program is a donation and completely voluntary and I may change or end my participation at any time.

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

**Automatic Credit or Debit Card Deduction:**

I authorize Cornerstone Ranch to charge my account the following amount each month  
\$ \_\_\_\_\_ USD each month on the  1st  20th To begin in \_\_\_\_\_  
(Month)

Visa  MC  Discover  AMEX

Name on Card \_\_\_\_\_

Card # \_\_\_\_\_ Exp. date \_\_\_\_\_

Security code \_\_\_\_\_

**Automatic Bank Withdrawal:** *(Through your checking or savings account)*

I authorize my bank to transfer the following amount to Cornerstone Ranch each month  
\$ \_\_\_\_\_ USD each month on the  1st  20th To begin in \_\_\_\_\_  
(Month)

Name on Account: \_\_\_\_\_

Routing Number: \_\_\_\_\_

Account Number: \_\_\_\_\_

Please attach a voided check or a savings account deposit slip. This will remain authorized in full Effect until Cornerstone Ranch has received written or verbal notification of its termination to be resolved in a timely manner.