LIGHTHOUSE
Bringing *love* to *life* Since 1984

Automatic Giving Form

Lighthouse is pleased to offer a convenient service that enables you to provide monthly LIFE SUPPORT automatically and conveniently from your checking or savings account.

Our plan uses Automated Clearing House Transfer (ACH Transfer) to:

- Save you time and checks
- Keep your support of LIFE and families consistent year-round
- Allow you to make changes to your giving easily

How to get started:

Complete the form below to authorize regularly scheduled contributions to Lighthouse Pregnancy Resource Center from your checking or savings account and **return it to us with your first monthly gift OR a voided check.** Your donations will then be made automatically on/or right after the 15th of every month. A record of your gift will appear on your bank statement and a Lighthouse receipt will be sent to the **e-mail address** you provide below.

The authority you give to charge your account will remain in effect until you notify us in writing to modify or end the authorization. Changes to the amount of your contribution must be received by our office (Events@LighthousePRC.org) **7 days before the contribution date**. Thank you for partnering to bring LOVE to LIFE!

AUTHORIZATION FOR AUTOMATIC CHECKING / SAVINGS WITHDRAWAL

I authorize **Lighthouse Pregnancy Resource Center** to initiate transactions to my checking or savings account as outlined below. This authority will remain in effect until I notify Lighthouse in writing to cancel it, giving them a reasonable amount of time to act on it.

_____
DONOR'S FULL NAME – PLEASE PRINT

_____
DONOR MAILING ADDRESS: CITY STATE ZIP CODE

_____
DONOR'S SIGNATURE TODAY'S DATE

E-MAIL: _____ *(Lighthouse will email your receipt HERE.)*

CELL PHONE: _____ HOME PHONE (optional): _____

DONOR'S FINANCIAL INSTITUTION: _____

AMOUNT OF CONTRIBUTION: $_____ TO BE TAKEN **MONTHLY** *ON 15TH DAY OR IMMEDIATELY AFTER*

Account Information: Please use my: ☐ Checking Account ☐ Savings Account

TRANSIT ROUTING NUMBER										
⑆										⑆

ACCOUNT NUMBER																

RETAIN FOR YOUR RECORDS

On _____ (date), I authorized Lighthouse PRC, at 297 Lafayette, Hawthorne, NJ, to initiate electronic transactions to my checking or savings account and have agreed to the terms above. I may revoke my authorization at any time by contacting:

LIGHTHOUSE
PO Box 227, Hawthorne NJ 07507 • 973-238-9047 x118 • Events@LighthousePRC.org