

DIRECT DEBIT/EFT



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Authorization Form Instructions

1. Complete this authorization form by indicating the amount and designation for your monthly contribution.
2. Send a blank check marked "Void" along with your form. The check will provide Missions Door with the necessary banking information. (U.S. banks only)

NOTE: If you are a current donor, your electronic deduction will not begin until next month. Please enclose a check for your current month's donation.

3. Mail the completed form, your voided check and your current month's donation to:

Missions Door

2530 Washington Street
Denver, Colorado 80205-3142

Thank you for selecting the direct debit option for your contribution.

I/we authorize Missions Door to arrange automatic deductions from my/our bank account. Please apply the contribution as follows:

Amount per Month	Missionary/Project Name (s)
\$ _____	_____
\$ _____	_____
\$ _____	_____

(If more space is needed, please attach complete list.)

Total Donation Amount: \$ _____ per month

Donation Start Date: _____ (month)

Please withdraw the funds on the 10th 20th of the month.

NAME

ADDRESS

CITY

STATE

ZIP

PHONE

EMAIL

Yes, I/we wish to receive news and information about Missions Door by email.

I/we wish to receive receipts by email rather than direct mail.

SIGNATURE

DATE

SIGNATURE

DATE

Remember to include a voided check with your form.



- > Phone 303.308.1818
 - > Fax 303.295.9090
 - > Finance@MissionsDoor.org
- MissionsDoor.org**