

MONTHLY CREDIT CARD AUTHORIZATION FORM

Until further notice, this form authorizes Mary Rigg Neighborhood Center to honor a draft on my account around the **1st** or **15th** of each month.

CIRCLE ONE

Amount of monthly gift \$ _____

Charge this gift to:

Mastercard Visa American Express Discover

Name (as it appears on card): _____

Preferred Name: _____

Credit Card Billing Address: _____

City: _____ State: _____ Zip: _____

Daytime Phone Number: _____

E-Mail: _____

Card Number: _____

Expiration: _____

Signature: _____ Date: _____

Security Code on Card*: _____

*The location of the security code depends on the type of card you hold:

VISA, MC, and Discover: Last three-or four digit cluster of numbers on back of card, near signature area

AmEx: On front of card, security code is four-digit number printed near embossed card number

Does your company match employee gifts? YES NO

If yes, what is the name of your company? _____

**PLEASE DESIGNATE
MY GIFT TO:**

- Annual Fund
- Food Pantry/Hunger Relief
- Employment
- Children and Youth
- Summer Day Camp
- Financial Coaching
- Senior Services
- Goodwin Comm. Center
- Other _____

- I would like someone from MRNC to contact me

Can we e-mail client success stories and updates to you?

YES NO

QUESTIONS? Call Jenna Wachtmann at 317-639-6106 ext 211