



MONTHLY SUSTAINERS CLUB

Please complete this form and mail to Clark County Food Bank with your gift:

Clark County Food Bank
P.O. Box 61833
Vancouver, WA 98666

- I wish to remain anonymous.
- My employer matches gifts. Please contact me for further information.

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: () _____ EMAIL: _____

DONATE VIA CREDIT CARD (Please select one of the following)

- VISA
- MASTERCARD
- AMERICAN EXPRESS
- DISCOVER

CARD #: _____ EXP: _____

CCV CODE: _____

(found next to your card number on the back of your credit card)

I authorize Clark County Food Bank to charge the following amount (**minimum \$10.00**) monthly:

- \$10
- \$25
- \$50
- \$75
- \$100
- Other _____

I wish my donation to be charged on the 5th or 20th day of every month. This authorization will remain in effect until I notify Clark County Food Bank in writing that I wish to change my contributions.

SIGNATURE: _____ DATE: _____



RECEIPT Please keep this portion for your records.

Monthly Pledge: \$ _____

Method of Giving: CREDIT CARD (LAST 4 DIGITS: _____)

Charged On: 5th or 20th Monthly

A year-end summary of your gifts will be sent to you in January for your tax records. All gifts are tax deductible to the full extent allowed by law. Monthly donations will appear on your credit card statement as Clark County Food Bank. Please direct any inquiries regarding electronic giving to **360.693.0939**. You may discontinue participation in the Monthly Sustainer Club at any time by notifying Clark County Food Bank in writing 10 business days prior to the next scheduled transfer.

Thank You