

## Make a Mark Ministries Automatic Donation Plan

The Automatic Donation Plan is a method of supporting Sure Passage Missionaries and Projects through a monthly transfer done electronically from your checking or savings account. Electronic Funds Transfer saves you time and money, avoiding postage and check costs and ensuring that your checks won't be delayed or lost in the mail. It also helps Sure Passage achieve better stewardship of your gifts by reducing processing time and costs. Please use this plan if you wish to give the same amount to the same project(s) each month. You may stop or change your plan at any time.

Thank you for considering this <u>safe</u>, convenient, and cost effective method of supporting your missionary project. To get started, *please complete this form and follow the instructions below*:

Name:	Make monthly deduction from (select one):  ☐ Checking account (attach a voided blank check) ☐ Savings account (attach a savings deposit slip)  Account Number:  Routing/ABA (9-digit number):  Bank Name:  Bank Address:  Bank Phone:	
Address:		
City: State: Zip:		
Daytime Phone:		
Email:		
Please send my receipts to (select one):  ☐ email address (electronically) or ☐ mailing address		
Please use my contribution(s) for the following: <u>Missionary or Project</u> <u>Amount</u>	Examples of Sure Passage Project Funds:	
A. <u>MMM</u> \$	<ul><li>Where Most Needed (General Fund)</li><li>Gardner Family Support (MGGG)</li></ul>	
B \$	Gattlier Failing Support (MOGG)     HEROES, Dave & Beth Weikel (HEROES)	
C\$	• Ieff Morrison Ministries (MIMM)	
Total Monthly Amount \$		
To start the month of:		
I give my bank permission to transfer the amount indicate month. This permission to charge my bank account is the Passage. This agreement will remain in effect until: 1) I consider the charge many transfer to the charge many t	e same as if I had personally signed a check to Sure ontact Sure Passage telling them to end this agreement	

I give my bank permission to transfer the amount indicated above to pay Sure Passage on the **5**<sup>th</sup> **day** of each month. This permission to charge my bank account is the same as if I had personally signed a check to Sure Passage. This agreement will remain in effect until: 1) I contact Sure Passage telling them to end this agreement and they have had a reasonable amount of time to act on it. OR, 2) Sure Passage or my bank sends me 10 days' written notice that this agreement will end. In the event of an error, I have the right to tell my bank to reverse any transfer. However, I must tell them in writing within 15 days of the bank statement or within 45 days after the transfer was made. I understand and agree that my bank is responsible for the accurate and timely posting of my transfer. In the event of an amount or double posting error, I will resolve this problem directly with Sure Passage.

I have read, understand and agree with the information on this form and have **attached** my voided blank check or savings deposit slip to this form.

Signature:		Date:
Mail to: Sure Passage	or	or
6660 Delmonico Dr. #D-280	Fax to:	Scan and Email to:
Colorado Springs, CO 80919	(719) 522-0104	support@surepassage.org