Electronic Donation Authorization Form

Sunday Breakfast Association, Inc (Sunday Breakfast Rescue Mission)

Please complete this form to authorize Sunday Breakfast Rescue mission to deduct a one-time or recurring gift from your checking/savings account or credit/debit card.

Email: info@sundaybreakfast.org  Subject: Accounting  Phone: (215)922-6400x1005

Mailing Address: PO Box 297, Philadelphia, PA 19105

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<th>Effective date of authorization:</th>
<th><em><strong><strong>/</strong></strong></em>/_____</th>
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<td>Type of authorization:</td>
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<td>New authorization</td>
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**FREQUENCY OF DONATION:**

- [ ] One Time
- [ ] Weekly
- [ ] Monthly on the 1st
- [ ] Monthly on the 15th

Date of first payment: _____/_____/______  Amount of payment: $________

**CHECKING / SAVINGS**

- [ ] Savings Account (contact your financial institution for Routing #)
- [ ] Checking Account (staple a voided check below)

Routing Number: _____________________________

Valid Routing # must start with 0, 1, 2, or 3

Account Number: _____________________________

I authorize the above organization to process debit entries to my account. I understand that this authority will remain in effect until I provide reasonable notification to terminate the authorization.

Authorized Signature:__________________________________________________________   Date:________________

**CREDIT CARD**

- [ ] Visa
- [ ] MasterCard
- [ ] American Express
- [ ] Discover Card

Credit Card Number: _____________________________  Expiration Date: ______/_____/______

Name on Card: _____________________________  CVV: ________

Billing Address (if different from above):

Email Address (for digital receipts): ________________________________________________

I authorize the above organization to charge my credit card in accordance with the information above.

Signature (as it appears on the credit card): ____________________________________________  Date: ___________

**FOR OFFICE USE ONLY**

DONOR ID #  DATE

A copy of the official registration information of the Sunday Breakfast Rescue Mission may be obtained from the Pennsylvania Department of State by calling toll-free within Pennsylvania 1-800-732-0999.