



Girl Scout Sustainers Monthly Giving Authorization Form

Thank you for participating in our Girl Scout Sustainers program by making monthly contributions to Girl Scouts – North Carolina Coastal Pines. Simply complete this form in its entirety and return via mail or fax. Thanks for your ongoing investment in our girls!

Yes! I want to contribute as part of the Girl Scout Sustainers!

I hereby authorize Girl Scouts - North Carolina Coastal Pines to withdraw funds from my bank account or credit card as indicated below. I understand that the withdrawal from my account will take place around the end of each month.

Name: _____ Date: _____

Signature: _____

Address: _____

City/State/Zip: _____ County: _____

Tel. #: _____ Email: _____

Girl Scout Sustainers Donation Information:

I authorize my bank/credit card to make monthly payments in the amount of \$_____ (\$10 minimum) for the timeline below:

Until I notify Girl Scouts – NC Coastal Pines, in writing, of its termination.

For _____ month(s) for a grand total of \$_____.

Your account or credit card will be drafted at the end of each month. You should anticipate the first draft 30 to 45 days after we have received your authorization. A record of each draft will appear on your regular bank or credit card statements.

Direction of Support:

Please direct my contribution as follows (please check one):

- Wherever the need is greatest
- Financial Assistance for Girl Scouts in need
- Girl Scout Camp Program and Facilities
- Programs: Science, Technology, Engineering, Math (STEM)
- Programs: Leadership, Awards, and Service Projects
- Programs: Environmental Stewardship and Citizenship
- Programs: Healthy Living and Self-Esteem Programs

(page 1 of 2)

Girl Scout Sustainers Payment Options:

Bank Draft (via Electronic Funds Transfer)*

Financial Institution: _____

Check One: Checking Savings

Routing/ABA # _____

Acct. # _____

See diagram on below to locate these numbers on your check.

*For bank draft, attach a voided check to this form. Deposit slips cannot be accepted.

Return this form, and attach a voided check (for bank draft payment) to:

Girl Scouts - NC Coastal Pines
Accounting Department
6901 Pinecrest Road
Raleigh, NC 27613

FAX: (919) 881-8359

Please note, for your security, we cannot accept this form, credit card numbers, or bank account information via email. To make changes to your gift, or for questions about monthly giving or other methods of payment, please call the Fund Development Office at 1-800-284-4475 x3315.

Please keep a copy of this completed form for your records.

Donor Name	501
Address	Date _____
Pay to _____	\$ <input type="text"/>
	Dollars
Financial Institution	
Memo _____	
123456789 : 11122233344 501	
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Routing # - Account	

Credit Card (Visa, MasterCard, or Discover)

Credit Card#: _____ - _____ - _____ - _____

CVC Code*: _____ Exp. Date: _____

**3 digit security code located on the back of your card*

My employer's matching gift form is enclosed.

Your gift is tax-deductible to the fullest extent allowed by law. Financial information about Girl Scouts – North Carolina Coastal Pines and a copy of its licenses are available from the State Solicitation Licensing Branch at 888-830-4989. The licenses is not an endorsement by the State of North Carolina.