

2008 VISA / MASTERCARD CHARGE AUTHORIZATION FORM

By listing the following required information and signing at the bottom of this form, I am authorizing Good Shepherd Catholic Church to automatically charge my credit card account on a monthly basis through the end of 2008 as indicated. These charges will begin in January 2008 and continue once per month through December 2008 unless I direct otherwise.

NAME: _____

ADDRESS: _____

CITY, STATE, ZIP: _____

PHONE: HOME _____ WORK _____

Please check account type: VISA _____ MASTERCARD _____

ACCOUNT #: _____

EXPIRATION DATE: _____

Charge My Credit Card Account Each Month As Follows:

REGULAR CONTRIBUTION: \$ _____

DEBT REDUCTION: \$ _____

OUTREACH: \$ _____

OVER & ABOVE ACCOUNTS
SCHOLARSHIP FUND: \$ _____

PSALM 23 FUND: \$ _____

MUSIC FUND: \$ _____

TANZANIA \$ _____

TOTAL MONTHLY CHARGE \$ _____

SIGNATURE

DATE: _____

PLEASE RETURN THIS FORM TO STEVE SINGER AT GOOD SHEPHERD.