



How to enroll as an Electronic Funds Transfer supporter

1. **Complete this entire form**, remember to indicate in the top field how much wish to contribute each month from your checking account.

2. **Select a month from the list provided** indicating when you would like the Electronic Fund Transfer to begin.

3. **Sign and date this enrollment form.**

4. **Include your contribution check** with this form and mail it to us and the address below. We will use the routing number and account number on your check to set up your EFT account. *It's that simple!*

Request for Monthly Electronic Funds Transfer (EFT)

Please accept my monthly gift of \$ _____ to be given by EFT. A check for my first monthly contribution is enclosed. I authorize Harvest USA to transfer the total amount indicated above on or about the 20th of each month beginning in month designated and this will remain in effect until I notify Harvest USA, in writing (mail or email), to change or terminate my gift.

Name

Address

City

State

Zip

Email Address

Phone

Signature

Date

Harvest USA

3901B Main Street, Suite 304
Philadelphia PA 19127

Phone: 215-482-0111
Fax: 215-482-0199
E-mail: gifts@harvestusa.org

Circle which month to begin your EFT gift:

January February March April May June
July August September October November December