Family Guidance, Inc.
Automatic Deduction (ACH) Contribution Form

This form authorizes Family Guidance, Inc. (FGI) to withdraw an amount specified by you from your checking or savings account on a monthly basis.

In order to ensure accuracy, please attach a voided check to this form. Return form via mail at the address below.

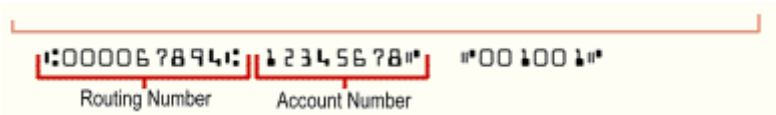
Your donation may be designated to specific funds below. **Thank you.**

Bank Account Information

Bank / Financial Institution Name

Bank Routing (ABA) Number **Bank Account Number**

You can obtain your routing [ABA] number and account number by looking at one of your checks or by calling your bank.



Account Type (Checking or Savings) **Date of Deduction (CIRCLE ONE)*** 5th 20th

***If the 5th or 20th fall on a weekend or Federal holiday, the deduction will occur on the following banking day.**

Please apply my donation as follows:

☐ Undesignated	$_____
☐ One-to-One Mentoring Program	$_____
☐ YES Program	$_____
☐ Camping Program	$_____
☐ Camp Expansion (Promise Camp)	$_____
☐ Other designation (please specify)_____	$_____
Total Donation Per Transfer	$_____

Printed Name

Address

( )

City/State **Zip** **Phone** **Email address**

By my signature below, I authorize FGI and the financial institution listed above to withdraw from my account the amount listed above (this includes my authorization for FGI to reverse any charges made in error.) This authority will remain in effect until I give written notice to cancel it. I understand that in order to automate recording of my donations, FGI may store my bank account information in their donor database software.

Signature **Date**

Family Guidance, Inc. 307 Duff Road Sewickley PA 15143