



P.O. Box 556, Monroe, NC 28111.

Recurring Donation Form

Business /Church/Org: _____

Name (print): _____ Date (mm/dd/year) ___/___/___

Address: _____ City _____ St. _____ Zip _____

Phone(s): Home (____) _____ - _____ Cell (____) _____ - _____ Business (____) _____ - _____

Email _____ Web Site _____

Type of Donor: Individual Business Church Faith Based Org Gov. Agency Other Org

Donation amount: \$ _____ Frequency Monthly Quarterly Semi-Annual Yearly

Beginning Date (mm/dd/yyyy) ___/___/_____ Ending Date (mm/dd/yyyy) ___/___/_____

CC: Card #: _____ Expiration Date ___/___/_____ (mm/year)

Bank Draft: Acct # _____ Type: Chk Svg; Routing # _____(9d)

Other/Comments: _____

Mail completed form to P.O. Box 556, Monroe, NC 28111.
SCM is a 501(c)3 organization and all gifts are tax deductible