



Giving and Pledge Form

Yes, I'll help JFA train thousands to make abortion unthinkable for millions, one person at a time.

Gift Designation:

Georgia Events

Name _____ Address _____

City _____ State _____ Zip _____

Email _____ Telephone _____

CHECK Amount Enclosed: _____ This gift is: My Monthly Gift My Quarterly Gift My Annual Gift A Special Gift

CREDIT CARD I authorize Justice For All (JFA) to charge my credit card as follows:

Frequency: Monthly Quarterly Once In the Amount of: _____ Card Number: _____ Card Type: MasterCard Visa Discover Name on Card _____ Expiration Date / Verification Code _____ Signature _____ Date _____

Recurring Credit Card Gifts Only: This authority is to remain in full force and effect until Justice For All has received my written notification of termination. (Please allow 30 days for processing. Cards will be charged around the 20th of the month.)

MONTHLY BANK ACCOUNT DEBIT (ACH) I authorize Justice For All (JFA) to initiate a debit to my account as follows:

In the Amount of: _____ Bank Name: _____ Bank Address: _____ Bank City, State, Zip _____ Account # _____ Account Type: Checking Savings Effective Date (Month, Year): _____ Signature _____ Date _____

Please attach voided check.

I understand that automatic monthly ACH bank debits occur on the 20th of the month. This authority is to remain in full force and effect until Justice For All has received my written notification of termination. (Please allow 30 days for processing.) I also agree to notify Justice For All 30 days prior to any financial institution or account changes.

For JFA Office Use Only: PID # _____ Date processed _____ Transit/ABA# _____ Initials _____

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