			Gift Des	signation: 63	9 - Rebekah Dy
ame					
ty					
nail			Telephone		
CHECK Amou	int Enclosed:				□ My Quarterly Gift □ A Special Gift
CREDIT CARD I authorize Justice Fo		arge my credit card as f	ollows:		
Frequency: In the Am	nount of: C	Card Number:			
	C	Card Type: 🛛 MasterC	Card 🗆 Visa	□ Discover	
	٨	lame on Card			
	E	Expiration Date	/	Verification	Code
	S	ignature			Date
Recurring Credit Card G	' ifts Only: "This an nation." (Please a	uthority is to remain in fu ullow 30 days for process	ll force and effect un ing. Cards will be c	ntil Justice For A harged around th	ll has received my writter he 20 th of the month.)
			n		
		NT DEBIT (ACH ate a debit to my accou			
	or All (JFA) to initi		unt as follows:		
MONTHLY BAI I authorize Justice Fo	or All (JFA) to initi Bank Name: _	ate a debit to my accou	unt as follows:		
MONTHLY BAI I authorize Justice Fo In the Amount of:	or All (JFA) to initi Bank Name: _ Bank Addres:	ate a debit to my accou	unt as follows:		
MONTHLY BAI I authorize Justice Fo In the Amount of:	or All (JFA) to initi Bank Name: <u>-</u> Bank Addres: Bank City, St	ate a debit to my accou	unt as follows:		
MONTHLY BAI I authorize Justice Fo	or All (JFA) to initi Bank Name: <u>-</u> Bank Address Bank City, St Account #	ate a debit to my accors:s:	unt as follows:		
MONTHLY BAI I authorize Justice Fo In the Amount of:	or All (JFA) to initi Bank Name: <u>-</u> Bank Address Bank City, St Account # Account Type	ate a debit to my accor s: ate, Zip e: □ Checking □ S	unt as follows:	e Date (Month,	Year):
MONTHLY BAI I authorize Justice For In the Amount of: Please attach voided check. "I understand that autom effect until Justice For All	or All (JFA) to initi Bank Name: Bank Address Bank City, St Account # Account Type Signature atic monthly ACH has received my w	ate a debit to my accor s: ate, Zip e:	20 th of the month. The second secon	e Date (Month, Fhis authority is t ow 30 days for p	Year): Date o remain in full force and rocessing.) I also agree t

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