

Northwest Family Services
Monthly Sustainer Enrollment

Equipping People with Vital Skills for Life



6200 SE King Rd.
Portland, OR 97222
www.nwfs.org

Name(s): _____

Address: _____

City/State/Zip: _____

Phone: _____

Email: _____

I/We authorize Northwest Family Services to automatically transfer my/our donation of \$ _____ each month from my checking account or credit card. (Complete the appropriate box below):

Checking Account (please enclose one of the following):
 Check with your first monthly gift
 A blank voided check
This option avoids credit card fees and more of your gift goes to families and teens.

OR

Credit/Debit Card (please select one of the following):
 VISA MasterCard
Card # _____
Expiration Date: _____

Signature (required): _____

Gift transfers will occur on or about the 5th of each month. This authorization will remain in effect until I/we notify Northwest Family Services, at any time, that I/we wish to change my/our contribution.

- I wish to remain anonymous. (i.e. no donor recognition listings, or placement of name on donor wall)
- My employer matches gifts. Contact me for information.
- I have listed Northwest Family Services in my Will or estate plan.
- I want to continue receiving mailings regarding giving toward ongoing efforts. (Since Sustainers are already giving monthly, you will not receive these mailings unless you check this box).

Monthly Sustainer Receipt

Keep this portion for your records.



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Amount of my monthly gift \$ _____ by:

Checking Account Credit Card

Gift transfers will occur on or about the 5th of each month.

Thank you for your support!

Northwest Family Services will provide a year-end summary of your gifts. Automatic gifts will appear on your bank or credit card statements. You may change or cancel your membership at any time by contacting Northwest Family Services. All gifts are tax deductible to the extent allowed by law. Tax ID# 93-0841022. All donor financial information is confidential and secure. We never sell or share donor information with other organizations.