

THANKYOU for wishing to be an 'ongoing' supporter of Cup O Joy...YOU keep us serving

AUTOMATIC WITHDRAWAL AUTHORIZATION

This form does not give the Cup O' Joy access to my account, account balance or any other personal information, only the ability to withdraw the agreed upon amount, on the agreed upon schedule. This authorization can be discontinued at any time. To discontinue or questions ask Jan at 920-437-6694

For my convenience my gift to Cup O' Joy will be automatically deducted from my checking or savings account and transferred to Cup O' Joy's account once a month or one time (as indicated).

Name of My Ba	ank:				
Is the account:	Checking	or Savings	(check one	e)	
Is the account:	Personal	or Business _	(check or	ne)	
Amount deduct	ted will be \$		One time	_, or Monthly	(check one)
Name on Accor	unt				
My Bank Acco	ount number				
	ting or Depository our account numbe			(found on	the left hand side of your
The Transfer is Between 1-3 rd		or , betw	reen the 14 th -16 th	of the month	(check one)
Transfer begins	s: Month	(please allov	v 30 days for the	bank processing)	
Attaching a Vo	ided Check is very	helpful©			
Signed:			Date		

*Please mail this form with a Voided Check to Cup O Joy, 232 S. Broadway, Green Bay, WI 54303