



An Avera Partner

Foundation

Automatic Payments Donor Authorization Form
An automated giving program for friends of Floyd Valley Hospital Foundation

PLEASE TYPE OR PRINT IN BLACK INK

Authorization type: [ ] new authorization [ ] change in gift amount [ ] change in account

Last Name First Name Middle Name

Mailing Address City State Zip

Please make my contribution directly from: [ ] Automatic Bank Withdrawal [ ] Payments by Credit Card

I hereby authorize Floyd Valley Hospital Foundation to initiate automatic payments from my bank or credit card, payable to Floyd Valley Hospital Foundation as follows:

Bank Information

Please enclose a voided check or a check for the first payment which will be used to initiate the transfer.

Financial Institution Name

Financial Institution Address

City State Zip

Debit/Credit Card Information

[ ] VISA [ ] MasterCard [ ] American Express [ ] Discover

Account Number Expiration Date

Name as it appears on the card

Signature

Gift setup information: [ ] Monthly [ ] Quarterly [ ] Semi-Annually
Day of Month: [ ] 1st [ ] 5th [ ] 10th [ ] 15th [ ] 20th [ ] 25th
Begin on: (mm/dd/yy) [ ] End on (mm/dd/yy) [ ] Continue until further notice

Gift designation: [ ] Greatest Needs Fund \$ [ ] Capital Campaign Fund \$ [ ] Children's Fund \$
[ ] Endowment \$ [ ] Steve H. Musson Emergency Services Endowment \$ [ ] Other \$

Your gift receipt letter will be sent end of calendar year.

This authority is to remain in full force and effect until Floyd Valley Hospital Foundation has received written notification from me of its termination in such time and manner as to afford Floyd Valley Hospital Foundation or named Financial Institution a reasonable opportunity to act on it.

Signature

Please print individual name

Date

- Please allow 4-6 weeks for monthly debits to initiate.
For more information, call the Floyd Valley Hospital Foundation Office at (712) 546-3492.
Please send completed authorization form along with a voided check (where applicable) to: Floyd Valley Hospital Foundation
% Executive Administrative Assistant
714 Lincoln St. NE, Le Mars, IA 51031