



Monthly Charitable Contributions

One of the fastest ways to grow an endowment is to make regular gifts to the principal. Whether contributions are large or small, over time, regular giving adds up and increases the grantmaking impact of an endowment fund. By completing and returning the form below, you authorize the deduction of regular contributions from your bank account or credit card to that of a named endowment fund.

I/We would like to make a monthly charitable contribution of \$_____ to the _____ Fund at the Hancock County Community Foundation (HCCF) on the last day of the month, beginning _____ and ending _____. I/We may notify HCCF in writing at any time to end the monthly contributions sooner.

Print Name

Signature

Address

City/State

Zip

Phone Number

Email

_____ **I/We would like monthly contributions to be made via Credit Card**

Account Number

Exp Date

CVS Code

Signature

Date

_____ **I/We would like monthly contributions to be made via Bank Account**

I/We hereby authorize Greenfield Banking Company, to initiate debit entries to my/our account indicated below and the financial institution named below to debit the same to such account in the amount of \$_____. I/We acknowledge that the origination of the ACH transactions to my/our account must comply with the provisions of the US law. **PLEASE PROVIDE COPY OF VOIDED CHECK.**

Financial Institution

Branch

Telephone Number

Address

City/State

Zip

Signature

Date

Please complete this form and return to :
Hancock County Community Foundation
Attn: Marie Felver, Vice President of Finance and Operations
312 E. Main Street, Greenfield ,IN 46140
mfelver@givehcgrowhc.org
Phone: (317) 462-8870

Acknowledgement letters for tax purposes will be mailed at the end of the calendar year.