



OF BERKS COUNTY, INC.

Charitable Donation Monthly Giving Credit Card Authorization

612 Reading Ave., West Reading, PA 19611 Ph: 610.374.8545

Please mail completed form to the above address - *Thank You!*

Monthly Donation Amount: \$ _____

Starting Month, Year: _____

Credit Card Type: _____

(Visa, MasterCard, American Express, Discover)

Credit Card Number: _____

Credit Card Expiration Date: _____ (month, year)

Name as it Appers on Card: _____

Security Code/ CVV2: _____

The last 3 digits on the reverse side of card.

For American Express, the 4 digits near top of card on front.

Billing Address Used for

Credit Card: _____

I authorize Lifeline of Berks County, Inc. to charge my credit card the monthly amount shown above effective the starting month and year indicated above. I understand that I may cancel at any time by contacting Lifeline at the address listed at the top of the page.

Signed: _____

PRINTED NAME

DATE

Thank you for your donation!

Lifeline of Berks County, Inc. is a registered 501 c(3) charitable organization