



Big Brothers Big Sisters
of Central Minnesota
Sustaining Giving

CONTACT INFORMATION:

Name _____

Address _____ City _____ State _____ Zip _____

Phone _____ Email _____

GIVING OPTIONS:

Bank Account: Please enclose a voided check to initiate giving plan from your preferred checking account.

Signature _____

Credit or Debit Card: Please complete information below.

Visa MasterCard AmEx Discover

Name of Card Holder _____

Account Number _____ Exp. Date _____

Billing Address (if different from above) _____

Signature _____

GIFT SCHEDULE:

Annual Gift Total	\$150	\$250	\$500	\$750	\$1,000	\$1,500	\$2,500
Monthly	\$12.50	\$20.84	\$41.67	\$62.50	\$83.34	\$125.00	\$208.45
Quarterly	\$37.50	\$62.50	\$125.00	\$187.50	\$250.00	\$375.00	\$625.00

Automated gifts remain in effect until Big Brothers Big Sisters is notified by the donor. The first credit card transaction will be processed upon receipt, all EFT transactions will occur on the first business day of every month. Should an error be made, we reserve the right to correct said error.

Monthly \$ _____ Quarterly \$ _____

Thank you! You make an immediate difference from today forward. Know that your purposeful decision provides a young person with a caring mentor whose friendship is professionally supported. If you have questions, please contact Brenda Jacobson, Advancement Director at 320-258-4514 or bjacobson@bbbscentralmn.org.