

CATALYST
PO Box 485
Martin, TN 38237
731-499-1806

info@CatalystMissions.org
www.CatalystMissions.org



March 17, 2008

Dear Catalyst Donor,

We truly appreciate your interest in the ministry of Catalyst. We trust that the capabilities to setup regular contributions through Electronic Funds Transfer will be helpful to you. To initiate this process we've assembled these directions to walk you through the required procedures.

At this point you have probably already downloaded this form from our website; next you should print both pages of this document. Once you print the document or if you were provided a paper copy by someone then you can begin completing the form on page two.

Please pay attention to each section and complete every applicable element of the form to avoid any confusion or delay in your electronic transactions.

- You can begin by completing all your contact information as directed.
- You will need to indicate the type of account that you intend to have the funds withdrawn from by placing a mark in either the *Checking* or the *Savings* box.
- Then please indicate if this is a new EFT or if you wish to change an existing EFT.
- If you chose to have the funds deducted from your *Checking* you will need to provide a blank check that you have marked VOID.
- Next please provide your preferred phone number. Just in case we need to contact you regarding the EFT.
- If you chose to have the funds deducted from your *Savings* you will need to provide a savings deposit slip with your bank routing number and account number on it.
- Then we will need the phone number of your local branch.
- Please indicate the month and year that you would like the transfers to begin.
- In this next section you can indicate how you would like your donations directed in the ministry of Catalyst.
- You can now sum the total that you would like to donate each month.
- Next you can provide any comments or notes that you think would benefit our personnel as we process your request.
- Finally, please sign and date the form.

Now you can simply mail the completed form and the voided check or deposit slip to Catalyst as the address above. We will do our best to process your request as soon as possible. If there are any questions we will contact you.

Sincerely,

A handwritten signature in black ink that reads "Kris Rickert".

Kris Rickert
Director of Communication
Catalyst Missions



Catalyst Missions
E-mail: info@CatalystMissions.org
www.CatalystMissions.org

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T: 731-499-1806

Application for Electronic Funds Transfer

I (we) hereby authorize Catalyst Missions to initiate entries to the account indicated below.

I also authorize the named depository to debit the same to such account. I agree this authorization will remain in effect until you receive written notification from me (or either of us) of its termination.

Name(s) _____ Address _____

City _____ State _____ Zip _____

Make the monthly deduction from my: Checking Savings
New EFT Changes in EFT

Checking Account # _____ Your phone # _____
(Enclose a voided, blank check.)

Savings Account # _____ Bank Phone # _____
(Enclose a savings deposit slip.)

Start Date (month) _____ We typically process the transfers around the middle of the month.

Please direct my (our) contributions to the following accounts.

	Account Number	Account Description	Amount
A:	_____	_____	\$ _____
B:	_____	_____	\$ _____
C:	_____	_____	\$ _____
D:	_____	_____	\$ _____
E:	_____	_____	\$ _____
F:	_____	_____	\$ _____
Total monthly donation will be:			\$ _____

Comments/Notes _____

Signature(s) _____ Date _____

If you have any questions please contact Catalyst using the information above.