



RECURRING CREDIT CARD DONATION AUTHORIZATION FORM

DONOR'S CONTACT INFORMATION

Name: _____

Address: _____

City: _____ State: _____ Zip: _____ Country: _____

Telephone: _____ Alternate Contact: _____

Email Address: _____

MONTHLY PAYMENT OPTION:

- I authorize a monthly payment in the amount of: \$ _____ to be taken on the **15th day of each month** starting on _____ (MM/YYYY), for the CNYSPCA

QUARTERLY PAYMENT OPTION:

- I authorize a quarterly payment in the amount of: \$ _____ to be taken out **Quarterly - March 31, June 30, September 30 and December 31** starting on _____ (MM/YYYY), for the CNYSPCA.

ANNUAL PAYMENT OPTION:

- I authorize an annual payment in the amount of: \$ _____ to be taken out **Annually** starting on _____ (MM/YYYY), for the Central New York SPCA.

PAYMENT INFORMATION

Card number: _____

Expiry date: _____

Visa MasterCard CVV # _____

Signature: _____ Date: _____

(Signature required)

This personal information is being collected under the authority of *The Central New York SPCA*. It will be used for administrative purposes related to monthly donations. It will not be used or disclosed for other purposes, unless permitted by the *Freedom of Information*. If you have any questions about the collection of your personal information, please contact the Central New York SPCA at 454-3771. Donors can cancel a recurring donation pledge at any time by send in a written request to do so to The Central New York SPCA, 5878 East Molloy Road, Syracuse New York 13211. All request received after the 15th of the month would apply to that following month.

Contributions are tax-deductible to the full extent of the law.
Central New York SPCA, Tax ID # 15-0532072, is a registered nonprofit 501(c)3 corporation.
CENTRAL NEW YORK SPCA, 5878 East Molloy Road, Syracuse, NY 13211