

Electronic Funds Transfer (EFT) Donation Form



Please Print and Mail to:

Star of Hope
Attn: Data Services
4848 Loop Central Dr., Ste. 500
Houston, TX 77081-2356

I want to help Star of Hope provide food, shelter, clothing and Christian encouragement to those in need by Electronic Fund Transfers from my checking or savings account.

Name: _____

Address: _____

Telephone Number: _____

Home

Work

E-mail Address: _____

Please charge my: Checking Account (Please attach voided check) Savings Account

Amount: _____ Monthly Quarterly Effective: _____

Account Number: _____

Bank Name: _____ Phone Number: _____

Bank Address: _____

Bank ABA Number: _____

Purpose of Donation: _____

- General Women & Family Development Center @ Cornerstone Community® Campus
 Food Children Men's Development Center

Signature _____ Date _____

This request is being made voluntarily and at any time I may cancel by sending a letter to:

Star of Hope
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(FOR DEVELOPMENT USE ONLY)

Date received: _____

Date Cancelled: _____



4848 Loop Central Dr., Ste. 500 • Houston, Texas 77081 • 713-748-0700 • www.sohmission.org

Men's Development Center Women & Family Development Center @ Cornerstone Community® Campus

