



E-Giving Program

St. Ambrose Catholic Church has some good news to share! Your gifts made through E-Giving Program work harder than ever to support our church. E-Giving Program is convenient, as well as safe, secure, and reliable! When you participate in E-Giving Program, your gift will be transferred conveniently from your Credit/Debit card or your checking account directly to St. Ambrose Catholic Church. A record of each gift will appear on your monthly statement. As a participant of the program, you are still free to make additional gifts by check or cash as the Lord provides!

CONTACT

Name(s): _____

Address: _____

City: _____ State: _____ Zip Code: _____

Company: _____ Title/Position: _____ Phone: (____) _____

Please add me to your mailing list. Email(s): _____

For office use only

Donor ID: _____

GIFT INFORMATION

Please Process my Gift: Weekly Monthly

Please Process my Gift on the: 1st 5th 10th 15th 20th 25th of the month

Please process my first gift on ____/____/____ (mm/dd/yyyy)

OR I would like to make a One-Time Gift

Please apply my gift to: \$_____ Offertory Contributions \$_____ Building & Maintenance

\$_____ Christmas \$_____ Easter \$_____ Restricted - Other (Specify: _____)

\$_____ St. Ambrose School Support \$_____ St. Vincent de Paul

\$_____ Total Gift Amount

Comments: _____

PAYMENT INFORMATION

Enclosed is a voided check for my gift. Please transfer my gift from my checking account. *OR*

My credit card information is listed below for my gift. Please transfer my gift from my credit card.

Card Number _____ Expiration Date ____/____

Yes! I wish 100% of my donation amount to go to St. Ambrose Catholic Church. I would like to pay the 3% credit card or \$0.25 ACH processing fee associated with my donation.

I understand my future donations will be transferred directly from my account as stipulated above. I understand that I may increase, decrease, or suspend my gift at any time through the online donation form at stambroseparishtucson.org or by contacting St. Ambrose Catholic Church by phone or mail. All donations provided to St. Ambrose Catholic Church comply with U.S. Law.

Signature (Required) _____ Date _____

For Office Use Only

\$ _____ Processing Fee Amount (3% for Credit Card gifts or \$0.25 for Checking Account gifts)

\$ _____ Total Donation Amount (required)
(Donation Amount specified above + Processing Fee Amount)

Please make a copy of this form for your records or you can request a copy from St. Ambrose Catholic Church