

HARLEQUIN

P R O D U C T I O N S

PAYMENT AUTHORIZATION FORM

Please return your completed form to
Harlequin Productions 202 4th Ave E, Olympia WA 98501 or fax it to 360-534-9659.
You may also contribute by phone at 360-786-0151 or online at harlequinproductions.org.
Donations qualify for a tax deduction. Thank you for your support.

I/we hereby authorize Harlequin Productions to initiate debit entries to the checking/savings account at the depository financial institution listed below in compliance with the provisions of US law. If necessary, Harlequin Productions may initiate credit adjustments for any transaction debited in error. This authority will remain in effect until Harlequin Productions is notified by me/us in writing to cancel these instructions. I/we will afford Harlequin Productions and financial institution listed below a reasonable opportunity to act upon any changes.

Please debit my (our) account as a donation to Harlequin Productions as follows:

\$ _____ monthly other (*specify*) _____

Please send donation receipt:
 after each debit annually

Commencing Date _____

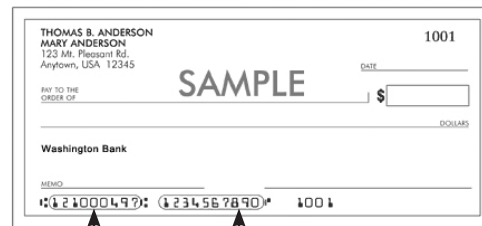
Financial Institution _____

Branch Address/City/State/Zip _____

Routing No. _____

Account No. _____

Checking Savings



Routing Number Account Number

Name (*print*) _____ ID Number _____

Signature _____ Date _____

Please attach a voided check to this authorization.

In case of questions, please contact me at

Day Phone _____ Evening Phone _____

Email _____