



**Electronic Funds Transfer / Direct Debit Setup or Update Form**  
**PLEASE ATTACH A VOIDED CHECK TO THIS FORM**

Option 1: I (we) authorize Samaritan Aviation to make **regular/monthly** deductions to my:  
 Checking Account  Savings Account (select one) for the amount of \$\_\_\_\_\_.  
 Deposited on the  5th or  20th (select one) for:  
*Select one:*  
 General Fund  Missionary: \_\_\_\_\_  
 Fuel for Life  Not listed: \_\_\_\_\_

Option 2: I (we) authorize Samaritan Aviation to make a **one time donation** from my:  
 Checking Account  Savings Account (select one) for the amount of \$\_\_\_\_\_.  
 Deposited on the  5th or  20th (select one) for:  
*Select one:*  
 General Fund  Missionary: \_\_\_\_\_  
 Fuel for Life  Not listed: \_\_\_\_\_

**My account information is as follows:**

Customer's Name (as it appears on bank account): \_\_\_\_\_

Bank Name (branch): \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Routing Number \_\_\_\_\_ Account Number \_\_\_\_\_

This authorization will remain in force and effect until Samaritan Aviation has received written notification from me (or either of us) of its termination. In case we need to contact you with any questions, please fill out your contact information below.

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Email \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Mail To:  
**Samaritan Aviation**  
**P.O. Box 20697**  
**Mesa, AZ 85277**

Questions? Please call: (970) 249-4341