

**GRACE COMMUNION INTERNATIONAL LTD***Living and Sharing the Gospel*

PO Box 402 Varsity Lakes QLD 4227

ABN 53 096 517 190

Regular Periodical

Payment Authority

<b>Name</b>				<b>OFFICE USE</b>	
<b>Address</b>				<b>ID No.</b>	
<b>City</b>		<b>State</b>			
<b>Phone No.</b>		<b>Postcode</b>			
<b>Email</b>					
<b>Please deduct</b>		\$		<b>From the below Credit Card commencing</b> (date)	
<b>Amount in words</b>				□□ / □□ / □□	
				<b>MONTHLY until further notice</b> (please specify date in month e.g. 2 <sup>nd</sup> )	
<b>Card Type</b>		<input type="checkbox"/> Visa <input type="checkbox"/> Master Card <input type="checkbox"/> American Express		<b>Amount</b> Contribution _____ Other: _____ Other: _____ <b>TOTAL</b> <b>\$</b> _____	
<b>Card No.</b>		□□□□ □□□□ □□□□ □□□□			
<b>Expiry Date</b>		□□/□□			
<b>Name on Card</b>					
<b>Signature</b>		<b>Date</b> □□/□□/□□			