## Thank you for partnering with A Rocha

## Please print, fill in and mail to: A Rocha USA / PO Box 1338 / Fredericksburg, TX 78624

Questions: Email us at hello@arocha.us

Name(s)			
Address			
City	State	Zip	
Phone			
Email			
GIFT DESIGNATION  Where need is greatest Other			
MONTHYLY GIFT	ONE-TIM	E CIET	
\$30/month\$50/month	_	\$150 <u>     \$</u> 500	
Other \$/month	Ψ50 Other 9	\$	
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My check is enclosed			
I authorize direct payment from I/we hereby authorize A Rocha US, indicated below and the bank name I /we acknowledge that the originat with provisions of US law. This authous USA and BANK have received written time and in such manner as to affort to act upon it.	A to initiate debit entriesed below, (BANK), to detion of ACH transactions hority is to remain in full ten notification from merd A Rocha USA and B	ebit the same to such account the same to such account must come force and effect until A Rodus of its termination in such ANK a reasonable opportu	ount. ply ocha ch
Name(s)			
Signed		Date	
Signed		Date	
Please fill in and attach voided c	heck.		
Bank Name		h	
City	State	Zip	
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Account No.			

