

# Concepts of Truth, Inc.

## Automatic Transfer Program

Yes, I want to contribute regularly to Concepts of Truth, Inc. through the Automatic Transfer or Automatic Debit Program.

My **voided check** is attached. I want my bank, \_\_\_\_\_ to pay Concepts of Truth, Inc. the contribution amount I have indicated below on the date shown below. This authorization will be the same as if I had personally signed a check and will remain in effect until I notify my bank and/or Concepts of Truth, Inc. that I wish to discontinue contributions.

Please transfer my tax-deductible gift of \$ \_\_\_\_\_ on the **1st** or **15<sup>th</sup>** of each month (**please circle one**).

This automatic transfer will begin on \_\_\_\_\_.  
(Month/Day/Year)

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

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

Phone \_\_\_\_\_

Email \_\_\_\_\_

### **Mail form to:**

Concepts of Truth  
PO Box 1438  
Wynne, AR 72396