

CPUSA Monthly Automatic Sustainer Program



Date _____

Name _____

District _____

Email _____

Address _____

City, State, Zip _____

Phone _____

YCL member

Sign me up! I want to be a regular supporter of the work of our Party and press.

My monthly pledge is: \$ _____

The method I prefer is:

credit

debit card

I authorize the charge/deduction of my contribution to Fund for Progress II in the amount of \$ _____ each month.

Charge my debit/credit card: Visa ____ MC ____ Discover ____ AmEx ____

Account number _____ Expiration Date _____

Name (*as it appears on the card*) _____

Billing address (*if different from above*) _____

Signature _____

I acknowledge that the origination of deductions from my account must comply with provisions of U.S. law. I understand that my monthly bank/credit card statement should show the amount and date payment was made to Fund for Progress II. I understand that I am responsible for ensuring that the account designated has sufficient funds/credits on my automatic payment date to allow the automatic deduction/charge of my contribution.

CANCELLATION: This authority shall remain in full force and effect, and the payment plan shall continue until written revocation received at least 15 business days prior to the monthly payment date. To cancel payment plan contact: Fund For Progress II, 235 W. 23rd St., NY, NY 10011.

Completed forms can be mailed to Esther Moroze, 235 W. 23rd St., 8th Floor, NY, NY, 10011. For more information, please call (646) 437-5318.