

Yes, I want to make a credit card donation or order!!

Donor Partner Number (if known): _____

Church Name: _____

Contact Person's Name: _____

Church Address: _____

City: _____

State: _____

Zip Code: _____

Phone: _____

Email: _____

Credit Card: [Drop down list-AMEX, Discover, MC, Visa]

Credit Card Number: _____

Expiration Date: _____

Signature (as it appears on card): _____

Book/Video/CD/Cassette: [Drop down list of books, etc. & their codes]

Book/Video/CD/Cassette: [Drop down list of books, etc. & their codes]

Book/Video/CD/Cassette: [Drop down list of books, etc. & their codes]

Book/Video/CD/Cassette: [Drop down list of books, etc. & their codes]

Partner/Project Name: _____

Partner/Project Number (if known): [Drop down list of codes]

Amount of Support: _____

Total Amount: _____

Descriptive Information or Comments (i.e., support, personal gift - non tax-deductible, outfitting expenses, etc): _____

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