

Yes, I want to make a pledge!!

Donor Partner Number (if known): _____

Title: _____

Name: _____

Address: _____

City: _____

State: _____

Zip Code: _____

Phone: _____

Email: _____

I am (We are) interested in: [Drop down list of codes]

_____ I (We) will pray regularly for them.

_____ I (We) would like to receive regular news of their ministry with InterServe/USA.

_____ I (We) pledge toward their financial support:

\$_____ Monthly \$_____ Quarterly \$_____ Annually

Information or Comments: _____

Mail to: InterServe
Attn: Finance Clerk
PO Box 418
Upper Darby, PA 19082-0418