



building hope | Micah 6:8

## Friends of The Great Commission/Shelter Canada

### Donation Form

PO Box 6305 Colorado Springs, CO 80934

Phone: 1-855-573-8483 Email: donations@friendsgc.com

Name: \_\_\_\_\_  
*First Name Middle Initial Last Name*

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_

Home: \_\_\_\_\_ Mobile: \_\_\_\_\_ Work: \_\_\_\_\_

Email Address: \_\_\_\_\_

**By Credit Card**  Visa  MasterCard  American Express  Discover

Name as on Card: \_\_\_\_\_

Card Type:  Personal  Corporate

Name of Company if Corporate Card: \_\_\_\_\_

Credit Card Number: \_\_\_\_\_ Expiry Date: \_\_\_\_/\_\_\_\_

**By Pre-Authorized Debit:**

For all pre-authorized debit contributions

**A VOID CHEQUE MUST BE ATTACHED.**

Donation Amount: \$ \_\_\_\_\_

Frequency:  Monthly  One-Time Gift

Donation Timing:  1<sup>st</sup> of Month  15<sup>th</sup> of Month Month to start: \_\_\_\_\_

Missionary or Project Designation: **Shelter Canada #F142**

Team Name: \_\_\_\_\_

I authorize the above donation to Friends of the Great Commission as specified above. I understand that I may revoke this authorization at any time, subject to providing 30 days' notice in writing or by phone. I have certain recourse rights if any debit does not comply with this agreement. For example, I have the right to receive reimbursement for any debit that is not authorized or is not consistent with this PAD Agreement.

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

#### FOR OFFICE USE ONLY

Date received at FGC: \_\_\_\_\_ 1<sup>st</sup> month Processed: \_\_\_\_\_

Received via:  Email  Fax  USPS  Interoffice mail