



Global Outreach

Giving By Credit Card (Visa or MasterCard)

Many have requested that we provide them with the ability to make **monthly** contributions by credit card. To assist you in your credit card giving, please provide the following information:

Name: _____

Street address: _____

City: _____ State: _____ Zip Code: _____

E-Mail address: _____ Phone: (____) _____

Please use my contribution(s) for the following Global Outreach missionaries or mission project funds:

Missionary or Mission Project Name	Amount
A. Tom and June Wilson	\$
B.	\$
C.	\$
D. * MISSION SERVICES	\$
Total monthly deduction will be	\$

Credit card number:

Expiration Date: /

Signature _____

Date _____

**Your gift to our Mission Services will enable us to continue our 100 percent policy which in turn will allow the missionary or mission project to receive more funds.*