Great Commission Global Ministries, Inc.

P.O Box 780609, Orlando, FL 32878-0609 USA
Phone 321-251-7218 ~ Fax 301-576-3749
Email: donations@gcgm.org ~ Website: www.gcgm.org

One-Time Donation Authorization Form

(Please print and complete the information below and mail, email or fax to Great Commission Global Ministries.)

I, _____, authorize Great Commission Global Ministries, Inc. to
(Contributor's Name)
electronically debit to my checking/savings/credit card account in the amount of _____ for
(Circle One) (Dollar Amount)
a one-time donation. I request the debit to occur _____.
(Date)

Address _____
(Number and Street) (City) (State) (Zip Code)

Email _____ Phone Number _____

Checking/Savings Account Information
Please attach a voided blank check.

Credit Card Information

Type _____ Account # _____ Expiration Date _____/_____ Code _____

I authorize Great Commission Global Ministries to debit my checking/savings/credit card account for a one-time
(Circle one)
donation for the specified amount indicated in this agreement.

SIGNATURE_____ DATE_____
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