



DONATION FORM

(Your gift will be receipted for income tax purposes.)

NAME _____

ADDRESS _____

CITY _____ PROV _____ POSTAL CODE _____

PHONE _____ EMAIL _____

As God empowers, I will contribute **MONTHLY** or a **ONE TIME GIFT** of:

\$50 \$100 \$250 _____

Please allocate my gift as follows:

As Needed Missionary _____

Mission Field _____

Project _____

1. Cheque(s) Enclosed (please make cheques payable to: CEO Ministries Inc.)

2. I would like to use my credit card

Visa Mastercard American Express

Card Number _____ Expiry Date _____
_____/_____/_____/_____ ____/____

Signature _____ Date _____

CEO Ministries Inc.
R.P.O. Box 283,
St. Vital, South, Manitoba, Canada R2N 3X9