

E-GIVING FORM

Through your giving you are helping to care for orphans (James 1:27) and to encourage growth in the local church (Acts 2:47). Thank you!

If you have any questions regarding your donation, please contact us by email at ndm@ninosdemexico.org or by phone at 636.583.2000.



**PO Box 309
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I'd like to make a Monthly Quarterly Annual One-time donation of \$_____.

Please process my donation on the 1st of the month **OR** 15th of the month

Please apply my donation to: General New Children Church Planting Education
 HUGS Sponsorship I Help Internship Living Link Missionary Support
 Medical STM Trip 5K Reg. /Donation #Giving Tuesday Trivia Night

I plan to make this donation in the form of Checking Account **OR** Credit Card



Credit Card Number _____ Expiration Date ____ / ____

Enclosed is a voided check OR credit card information for my donation. Please transfer my donation from my checking/credit card account. I understand my future donations will be transferred directly from my account as stipulated above. I understand that I may increase, decrease, or suspend my gift any time through the online donation form at www.ninosdemexico.org or by contacting Niños de México by phone or mail. All donations provided to Niños de México originating as ACH transactions comply with U.S. Law.

Signature _____ **Date** _____
(Required)

KEEP THIS PORTION FOR YOUR RECORDS

For your convenience, record your donation \$_____ Monthly Quarterly Annual One-time

Processed on the: 1st of the month **OR** 15th of the month.

Applied to: General Fund New Children Fund Church Planting Education HUGS Sponsorship
 I Help Internship Living Link Missionary Support Medical STM Trip

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