



Hands of Mercy Ministries

Bringing God's love to the unreached and hope to the underserved

GIVING FORM

Money donated to HOMM will be used strategically to assist indigenous organizations and missionaries in sharing Christ with unreached people groups and serving the underserved.

Name(s) _____

Address _____

City _____ State _____ Zip Code _____

Telephone _____ Email _____

I'd like to make a One-Time Gift Monthly Gift Quarterly Gift Annual Gift

On the 5th of the month **OR** 20th of the month

Start Date: ____/____/____ (mm/yyyy)

In the amount of \$25 \$50 \$75 \$100 \$250 \$500 \$ _____ Other Amount

All donations will be applied to our General Fund unless you notify us of a special ministry you want to support.

Comments: _____

Please transfer my donation from my:

Checking Account [Please attach a voided check]

- OR -

Credit Card Account CC Number _____ Expiration Date ____/____



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 at any time through the online donation form at www.handsofmercyministries.org or by contacting Hands of Mercy Ministries by phone or mail. All donations provided to Hands of Mercy Ministries comply with U.S. Law.

Signature (Required) _____ Date _____

KEEP THIS PORTION FOR YOUR RECORDS

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