



**CEF**  
CHILD EVANGELISM  
FELLOWSHIP®

Since 1937 *Reaching children worldwide™*  
Child Evangelism Fellowship® of Maine, Inc.

431 Campground Road  
Livermore Falls, ME 04254  
(207) 897-6182  
www.cefofmaine.org



## GIVING FORM

You can share in our commitment to help further the ministry of reaching children for Christ at Child Evangelism Fellowship of ME, Inc. When you participate, your donation will be transferred conveniently each month from your checking account or credit card directly to Child Evangelism Fellowship of ME, Inc.

Your donation will go even further because our paperwork will be reduced; our income will be more predictable, putting your donation to work immediately to help the people who are served by our mission.

Name(s) \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Telephone \_\_\_\_\_ Email \_\_\_\_\_

I'd like to make a **One-time** Credit Card donation of \$\_\_\_\_\_.

I'd like to make a **recurring donation** of \$\_\_\_\_\_ on a Monthly basis **OR** \_\_\_\_\_ Quarterly basis

Please process my **recurring donation** on the \_\_\_\_\_5<sup>th</sup> of the month **OR** \_\_\_\_\_20<sup>th</sup> of the month

Please apply my donation to: \_\_\_\_\_ General Fund \_\_\_\_\_ J. Romano Account \_\_\_\_\_ Joanna Frost Account  
\_\_\_\_\_ Jeanette Linsey Account \_\_\_\_\_ V. Fast Account \_\_\_\_\_ E. Daigle Bean Account \_\_\_\_\_ Memorial Fund

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.cefofmaine.org or by contacting Child Evangelism Fellowship of ME, Inc. by phone or mail. All donations provided to Child Evangelism Fellowship of ME, Inc. originating as ACH transactions comply with U.S. Law.

Signature \_\_\_\_\_ Date \_\_\_\_\_  
(Required)

### KEEP THIS PORTION FOR YOUR RECORDS

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**Record your Recurring** \_\_\_\_\_ Monthly \_\_\_\_\_ Quarterly donation of \$\_\_\_\_\_ on the \_\_\_\_\_5<sup>th</sup> of the month \_\_\_\_\_ 20<sup>th</sup> of the month

**Record your One-Time Credit Card** donation of \$\_\_\_\_\_

Please apply my donation to: \_\_\_\_\_ General Fund \_\_\_\_\_ J. Romano Account \_\_\_\_\_ Joanna Frost Account  
\_\_\_\_\_ Jeanette Linsey Account \_\_\_\_\_ V. Fast Account \_\_\_\_\_ E. Daigle Bean Account \_\_\_\_\_ Memorial Fund

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