



# Acts 4

Ministry, Inc.

Inspiring You To Act In Love

Furniture  Clothing  HomeGoods

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

Address \_\_\_\_\_

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

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

I'd like to make a  One-Time Gift  Monthly Gift\*  Semi-Annual Gift\*

\*Please process my recurring gift on the  1<sup>st</sup>  5<sup>th</sup>  10<sup>th</sup>  15<sup>th</sup>  20<sup>th</sup>  25<sup>th</sup> of the month

\*Please start my recurring gift on the \_\_\_\_ / \_\_\_\_ / \_\_\_\_ (mm/dd/yyyy)

In the Amount of  \$5.00  \$25.00  \$50.00  \$100.00 \$ \_\_\_\_\_ Other Amount

**Yes! I wish 100% of my donation amount to go to Acts 4 Ministry, Inc. I would like to pay the processing fee associated with my donation. (Please enter amount below)**

Please add \$ \_\_\_\_\_ (\$0.25 for ACH or 3% for credit cards)

**Total Donation Amount: \$ \_\_\_\_\_ (required)**

Please apply my gift to:  General Fund  Clothing Ministry  Furniture Ministry

Special Projects – please specify - \_\_\_\_\_

Comments: \_\_\_\_\_

Enclosed is a voided check for my donation. Please transfer my gift from my checking account.

OR

My credit card information is listed below for my donation. Please transfer my gift from my credit card.

Credit Card 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.acts4.org](http://www.acts4.org) or by contacting Acts 4 Ministry, Inc. by phone or mail. All donations provided to Acts 4 Ministry, Inc. comply with U.S. laws and regulations.*

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

Please make a copy of this form for your records or you can request a copy from  
Acts 4 Ministry, Inc.  
PO Box 4524 • Waterbury, CT 06704 • (203) 574-2287 • [www.acts4.org](http://www.acts4.org)