

CONTRIBUTION FORM

Name _____ Date _____ Giver's Code _____

CHECK, CASH or MONEY ORDER ENCLOSED FOR

Tithe/Dues \$ _____
Women's Ministries \$ _____
Youth \$ _____
Children's Ministries \$ _____
Girls Ministries \$ _____
Royal Rangers \$ _____
MBA \$ _____
Death Benefit Assoc. \$ _____
Missions Percentage \$ _____
Advance Fund \$ _____

WM One-A-Week \$ _____
GM Quarter-A-Week \$ _____
Sarah's Home \$ _____
Eagle's Nest \$ _____
TC General Fund \$ _____
TC House of Promise \$ _____
TC Utah \$ _____
Other # \$ _____
Other # \$ _____
Other # \$ _____

Please make check or money order payable to:

RMMN

6295 Lehman Drive, Suite 202, Colorado Springs, CO 80918-8434

TOTAL ENCLOSED \$ _____

☐ Check

☐ Cash

☐ Money Order

Please Complete This Section if there is a Change of Address, Telephone, or Email Address

Name _____

New Street Address _____

Post Office Box _____ Apartment/Suite # _____

City _____ State _____ Zip+4 _____

Telephone () _____ Fax () _____

E-mail Address _____

Mail to:

*The Rocky Mountain Ministry Network of the Assemblies of God
6295 Lehman Drive, Suite 202 • Colorado Springs, CO 80918-8434*

PLEASE INCLUDE ANY NETWORK NEWS ITEMS OR PRAYER REQUESTS

Name of Person Making Request: _____

News Item/Request: _____

Rocky Mountain Ministry Network of the Assemblies of God