



Serving Christ By Serving His Missionaries

Individual or Organization Name: _____

Contact Name (if for an Organization): _____

Address: (related to credit card) _____

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Comments: _____

Gift Amount: \$ _____

- One Time Gift OR Recurring each: Month Quarter Year

Credit/Debit card gift:

Type of Card MasterCard Visa Discover American Express

Name as on credit/debit card _____

Card # _____

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Please use this gift for:

- General Fund Donation/Where Needed Most
 Aircraft Funding (maintenance/upgrades)

Cargo Shipping Donation:

Missionary Name/Acct # _____ Sender's Name _____

Box weight _____ lbs. Number of boxes _____ Contents _____

Agape Shipping Cost (\$2.25 lb) _____ Missionary Shipping Cost (\$2.25 lb)* _____

*(Includes \$0.50 temporary fuel surcharge)

- Staff Support, preference to: _____
 Other (specify) _____
 Missionary Payment on Account

If you have any questions, please contact us at 941.488.0990 or giving@agapeflights.com

All gifts are tax-deductible to the extent allowed by law.

Thank you for your gift to Agape Flights. Please mail this form to:

Agape Flights, 100 Airport Avenue E., Venice, FL 34285

www.agapeflights.com

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