

DONATION/PLEDGE FORM

Please complete your contact information below and check all that apply:

Don	or(s) Name
Add	ress
Pho	ne 🔲 I would like this donation to be anonymous
A C	GIFT OF SUPPORT
1,00	I would like to become a covenant partner and pledge \$ per month for months I have enclosed my check for this month's pledge payment
	Instead of a pledge, I am enclosing my check in the amount of \$ in support of your ministry
	My employer participates in the matching gift program
	Name of Employer
	(Optional) My donation is in memory of Please send an acknowledgement to:
Nan	ne
Add	ress
SPE	ECIAL INTEREST
	I would like to volunteer my time to help in some way
	My church may be interested in supporting your ministry and possibly scheduling a Good News Home presentation to its congregation or mission committee
Chu	rch NamePhone
Add	ress
/=	Please make check payable to / mail this form to:

Good News Homes 210 East Madison St. LaGrange, KY 40031

Thank You!