

Please print this form, fill out and mail or fax to the address below.



THE GENERAL COUNCIL OF THE ASSEMBLIES OF GOD

Faith Promise Form

We promise to invest each month as the Lord enables us (\$US) _____ for the
(total monthly)
support of Victor & Kathleen Varis in ministry to Chi Alpha
(Missionary or Project) (field)
Missionary/Ministry Account Number (if known) 202227 5

DONOR INFORMATION (Leave lines blank if not applicable)

Select One: Monthly _____ One Time Gift \$ _____ Church Promise _____
Check One: Personal Promise _____

DONOR NAME (Please Print) _____ **GC ACCT. NO.** _____

Street Address _____

City _____ State _____ Zip Code _____

U.S. A/G CHURCH TO CREDIT _____ **GC ACCT. NO.** _____

Street Address _____

City _____ State _____ Zip Code _____

Pastor or Individual _____ **Date** _____
(Signature)

Home Area Code/Phone _____ **District** _____

FAX _____ **Email** _____

Additional Information: The Assemblies of God Foreign Missions and Home Missions Departments require enough signed faith promises to cover the amount of the missionary's monthly budget before the missionary is authorized to leave for the mission field. Please help your missionary get to the field by mailing the signed faith promise form as soon as possible with your first check. Thank you!

Make Checks Payable and Mail to:
The General Council of the Assemblies of God
Attn: Contributor Services Dept.
1445 N. Boonville Ave.
Springfield, MO 65802

____ **Please DO NOT add me to other mailing lists**

____ **Please send preaddressed giving envelopes**

To record your faith promise prior to your first donation,
you may Fax this form to: 417-866-6415