

PARTNERSHIP WITH DAVE & BETH GOFF

___ I/we will partner with the Goffs by investing _____ per month.

___ I/we will partner with the Goffs with a donation of _____.

___ I/we will partner with the Goffs by committing to faithful prayer support.

FINANCIAL CONTRIBUTIONS WILL RECEIVE A TAX DEDUCTIBLE RECEIPT AT YEAR'S END.

Cheques (made payable to ACOP).

Pre-authorized withdrawal must forward a blank cheque marked "VOID".

Please note date preferred as follows; ___ 1st of each month or ___ 15th of each month.

Please indicate when donations are to commence ___/___/___

Name (print)- _____ Signature: _____

___ VISA ___ MASTERCARD ___ AMERICAN EXPRESS

Card # _____ Card expiry date _____

Cardholder name _____ Signature _____

DONOR RECEIPT INFORMATION

NAME _____

ADDRESS _____

POSTAL CODE _____

PHONE _____ CELLPHONE. _____

EMAIL ADDRESS _____

DONATIONS SHOULD BE SENT TO:

Apostolic Church of Pentecost

119 - 2340 Pegasus Way NE
Calgary, Alberta T2E 8M5
Canada

Phone: (403) 273 - 5777

Fax: (403) 273-8102 Web:

www.acop.ca

Dave and Beth Goff Info:

Email: dave@dgoft.com

Web: www.dgoft.com