

# THE METHODIST CHURCH GHANA NORTH AMERICA DIOCESE



## NAmD DEVELOPMENT FUND (FOUNDATION DONOR)

# DONATION FORM

AMOUNT	\$5,000.00	\$2,000.00	\$1,000.00	\$500.00	\$200.00	\$100.00	\$50.00
CHECK	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Donor's Full Name: \_\_\_\_\_

Address: \_\_\_\_\_

Amount (USD): \_\_\_\_\_

Email: \_\_\_\_\_

Phone Number: Cell: \_\_\_\_\_ Home \_\_\_\_\_

### Preferred Instalment Period

A |  Annually    B |  Quarterly    C |  Monthly    D |  Weekly

Donations Payable to: **zelle** 

- Zelle: \$RMCNamd@gmail.com
- Checks: NAMD Development Fund
- Cash app: +1 (404) 642-1933

Return the complete form to

- 3734 Rosebud Road, Loganville, GA
- Scan / email: rmcnamd@gmail.com



 SCAN ME

\_\_\_\_\_  
Donor's Signature

\_\_\_\_\_  
Date

