Contact Information	
Name	
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Address	
	StateZip
Financial Commit I will commit to final (please check the ap ONE TIME GIFT \$10 \$25 \$50 \$100 \$250 \$100 \$100 \$250	ncially support Echo Ministries
My preferred metho	nd of giving is:
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☐ Electronic Giving	
· ·	ount 🗖 Savings Account
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Please return this card to the address below. All donor information will be kept confidential. You will receive quarterly statements and a year-end statement for tax purposes. Donations must be postmarked by Dec. 31 of the tax year in which you wish to give.