



Intention to Support

Send completed form and/or gift(s) to:
Association of Baptists for World Evangelism
980 Adelaide Street S., Suite 34
London, ON N6E 1R3
Fax: 519-690-1618,
Email: office@abwecanada.org

In the U.S. please mail or fax this form to:
Rev. Glenn Priddy, Director of Missionary Finance
ASSOCIATION OF BAPTISTS FOR WORLD
EVANGELISM, INC.
PO Box 8585
Harrisburg PA 17105-8585
Phone: (717) 774-7000
Fax: (717) 774-1919
Email: missionaryfinance..abwe.org

We wish to support Earl & Kathi Cooper ID # 013249

Your name _____

Address _____

Phone _____

E-mail _____

Amount of support by cheque:

Monthly \$ _____

Quarterly \$ _____

Annually \$ _____

Other \$ _____

Our support will begin _____

Sign up for ABWE's Automatic Support Program

I authorize automatic debits on my/our or church:

Chequing acct # _____

Savings acct # _____

Amount of approved debit: \$ _____ to be taken on the
1st or 15th of each month (circle one).

**Please note: We must have a voided cheque
to process your request.**

X _____

(Authorized Signature Required)

(Signature)

(Date)

Note: Those on automatic bank withdrawal or sending post dated cheques will receive receipts at year end. Otherwise receipts are mailed, with Director's letter, when gift is processed. Please check if you would like to:

Receive Director's monthly letter by email (if receipts held until year end)

There is nothing binding in this statement. A.B.W.E. needs this form on file to logically evaluate the missionary's account before clearance is given to send them to the field.