



Ambassadors International Ministries, Inc.
Electronic Funds Transfer

The Electronic Funds Transfer (EFT) program allows you to save a stamp by setting up automatic donations each month to support the work of AIMI. This is a free service that assures that your gift is received safely and promptly and will still be acknowledged by a receipt.

To Enroll:

1. Complete this form (page one only for new users)
2. Include a check marked "VOID" with the form, as this provides the necessary bank information
3. Mail the form and the check to P.O. Box 627, Longmont, CO 80502

(Please note that this program takes about four weeks to set up, so consider including a check with your upcoming donation in the package so you don't miss your donation)

I wish for donations to be given on the
____ 5th ____ 15th ____ 25th
of each month.

My donation is for:

- \$____ AIMI
\$____ The Pines
\$____ Child Living Sponsorship
\$____ Child Education Sponsorship
\$____ Where Needed Most
\$____ Missionary _____
\$____ Total Donation per month

Name _____

Address _____

Email _____

Phone _____

Date to begin EFT _____

Signature _____

Date _____

(If joint account)

Signature _____

Date _____



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Program Adjustments

Please complete this form and return (with the voided check if necessary) if you are:

- Changing the amount of your monthly gift
 - Changing the designation of your gift
 - Changing banks or checking accounts
 - Cancelling your EFT enrollment
-

Name _____

Address _____

Email _____ Phone _____

Check all that apply

Change the amount or designation of the gift

\$____ AIMI

\$____ The Pines

\$____ Child Living Sponsorship

\$____ Child Education Sponsorship

\$____ Where Needed Most

\$____ Missionary _____

Change bank account information (*please include a void check for this to process*)

Cancel my EFT enrollment beginning on _____ (date)

\$_____ Total (Please note that this form will overwrite your previous EFT, so this total should be your full total, rather than the amount changed)

Signature _____ Date _____

(If joint account)

Signature _____ Date _____