

**DONATION FORM**

State of Ohio Non-Profit Certificate No. 1887380

After prayerful consideration I/we acknowledge my/our commitment to God and WINGS by committing to the following:

Making the following pledge of faith in this ministry for the year. Pledge is due on 15th of the month. Please place the amount you will be able to pledge per month.

\_\_\_\_\_ \$10.00/MO. \_\_\_\_\_ \$20.00/MO.

\_\_\_\_\_ \$25.00/MO. \_\_\_\_\_ OTHER

Month start date \_\_\_\_\_

NAME \_\_\_\_\_

ADDR \_\_\_\_\_

CITY \_\_\_\_\_

STATE \_\_\_\_\_ ZIP \_\_\_\_\_

TELEPHONE \_\_\_\_\_

E-MAIL \_\_\_\_\_

Tax donation Account Form will be sent out by the end of January for the calendar year.

CASH, MONEY ORDER, CHECKS

PAYABLE TO WINGS MINISTRY OF EDUCATION INC

Please tear off side portion and mail to address listed below.

1301 Wisconsin Ave. Springfield, OH 45506

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