

PARTNERING WITH _____

CALEB NELSON

Serving on Staff at School of Missionary Aviation Technology through Proclaim Aviation Ministries

- I want to receive their prayer letters. email it! mail it!
- I would like to contribute a: One-time Gift Monthly Recurring Gift
- I have enclosed:

\$

in the amount of



proclaimaviation.org/donate



PO Box 356 Worthington, MN 56187
 connect@proclaimaviation.org
 507.376.9480

Name(s) _____

Address _____

City _____ State _____ Zip _____

Phone [] _____ Email _____

Please make checks payable to: Proclaim Aviation Ministries

Electronic Payments

I AUTHORIZE PROCLAIM AVIATION MINISTRIES TO TRANSACT:

- A One-time donation of \$
- Recurring donations of \$ beginning ____ / ____ / ____ and recurring: weekly monthly

TO BE TRANSACTED VIA:

- Credit/Debit Payment
 - VISA Name on card _____
 - MasterCard Card # _____
 - Discover Ex. Date ____ / ____ CCV# _____
 - AMEX
- OR** Automatic Bank Transfer
 - If choosing this option, a blank voided check and email address are required.
 - voided, blank check is included
 - email address is listed on front

Signature _____ Date _____



Proclaim Aviation Ministries is recognized by the IRS as a 501(c)(3) nonprofit organization. Tax-deductible receipts will be issued for contributions received. Contributions are solicited with the understanding that Proclaim has complete discretion and control over the use of all donated funds.



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aviation. How we sustain ministry at **the ends of the earth.**