

Bethel Christian Mission Inc.

Serving Jesus in Jamaica

INTENTION TO SUPPORT

We wish to support Bethel Christian Mission.

Your Name _____

Address _____

City / State / Zip Code _____

Phone _____

E-mail _____

Amount of Support by check:

Monthly \$ _____

Quarterly \$ _____

Annually \$ _____

Other \$ _____

Our support will begin _____

Signature

Date

Please mail this form to the following address:

Bethel Christian Mission, Inc.
P.O. Box 206055
Louisville, KY 40250