



Dear Ellen:

We would like to support the short-term mission ministry of _____ to _____.

We are:

_____ Enclosing a check made out to ASON International. We understand that all funds sent for this team member will be applied to their mission team fund. Any funds that this team member receives above and beyond their needs will be applied to the needs of other team members and to needs on the field.

_____ Praying for this team

Name _____

Address _____

City, State Zip Code _____

Please **make checks out to ASON International** and mail them to:

ASON International
PO Box 411210
Melbourne, FL 32941



All gifts are tax deductible. But, please do not write anyone's name on the check. The IRS will not allow us to make this a tax deductible gift if you do. This response form will insure that your gift is applied to the right fund. **I**



If you would like to donate by credit card please fill out the following: or go online to www.ason.org/donate today. Be sure to put the name of the team member in the description field so that the funds are applied to the correct place!

_____ Please charge my credit card \$ _____ (amount) to help _____ (Team Member's Name) with their mission

Account Number: _____

CVV Code (3 digits from back of card) _____

Name (as it appears on your credit card): _____

Phone number: _____

E-mail Address: _____ Expiration Date of credit card: _____

Signature: _____

FOR FLORIDA RESIDENTS, A COPY OF THE OFFICIAL REGISTRATION AND FINANCIAL INFORMATION MAY BE OBTAINED FROM THE DIVISION OF CONSUMER SERVICES BY CALLING TOLL-FREE WITHIN THE STATE 800-435-7352. PLEASE REFER TO REGISTRATION NUMBER CH2674. REGISTRATION DOES NOT IMPLY ENDORSEMENT, APPROVAL OR RECOMMENDATION BY THE STATE.

ALL DONATIONS TO ASON ARE INCOME TAX DEDUCTIBLE, NON-REFUNDABLE AND MADE WITH THE UNDERSTANDING THAT ASON HAS COMPLETE DISCRETION AND CONTROL OVER THE USE OF ALL DONATED FUNDS.

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