

**Pre-Authorized Debit (Electronic Funds Transfer) Donation Request**

(Available to CANADIAN donors only)

Date request received: \_\_\_\_\_

NAME of donor (surname, first name) \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_ PHONE NO. \_\_\_\_\_

MINISTRY designated for support: \_\_\_\_\_

OR

\_\_\_\_\_ ICMS administrative/operational support

DONATION AMOUNT being authorized: \$ \_\_\_\_\_

DONATION FREQUENCY \_\_\_\_\_ ONE time only on \_\_\_\_\_

OR

MONTHLY on the 1<sup>st</sup> \_\_\_\_\_ OR on the 15<sup>th</sup> \_\_\_\_\_ of the month

beginning on: \_\_\_\_\_

\_\_\_\_\_  
Signature

PLEASE NOTE: For automatic debit donations we require a personal cheque marked VOID.

The requested electronic donation transaction(s) will be processed at the beginning or middle of (each) month. Thank you for your kind support of ICMS ministries.

For assistance or for more information on making donations,  
email: [office@icmsgo.com](mailto:office@icmsgo.com) giving your name and phone number and our bookkeeper will contact you.

INTERNATIONAL CHRISTIAN MISSION SERVICES (ICMS), B11-32112 South Fraser Way, Abbotsford, BC  
PO Box 24, Stn A, Abbotsford, BC V2T 6Z4 Canada  
PO Box 8000 PMB 698, Sumas, WA 98295 USA  
Phone/Fax: 604-850-1817

For office use only
Processed on _____
Processed by _____