

# Enjoy the benefits of ACP!

• *No more*  
checks to write!

• *No more*  
bank check charges!

• *No more*  
postage stamps!

• *Our administrative costs*  
are reduced,  
making more funds  
available for ministry!



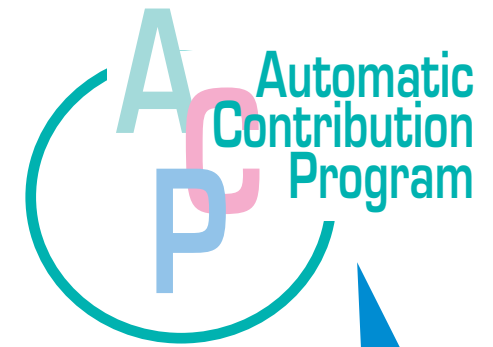
  
Latin America Mission

*The Latin America Mission is  
an international community  
of men and women, who,  
motivated by their love for  
the Lord Jesus and in  
obedience to His commands,  
encourage, assist  
and participate  
with the Latin Church  
in the task of building  
the Church of Jesus Christ  
in the Latin world and beyond.*



*A higher standard.  
A higher purpose.*

The Latin America Mission is a charter member of the Evangelical  
Council for Financial Accountability.



# Helping your gift go further



P.O. Box 52-7900  
Miami, FL 33152  
Tel. 305-884-8400  
800-275-8410

[www.lam.org](http://www.lam.org)

## Your gift can go even further!

We are grateful for your desire to participate in the ministry of the Latin America Mission through your support and prayers on behalf of LAM's missionaries and ministries. Each gift you send is a tangible demonstration of your commitment with us to make the name of Jesus Christ known and to reach out in compassion to a world in need.

To help you in that commitment, we are pleased to send you information on LAM's Automatic Contribution Program (ACP).

When you participate in the Automatic Contribution Program, your monthly or quarterly gift will be transferred directly from your checking or credit card account to Latin America Mission.

**No checks to sign,  
no envelopes or stamps to lick...  
and your gift goes further  
by reducing our costs!**

## You still retain control of your donations.

Simply notify us in advance of any changes you would like made, and these will be reflected on subsequent donations.

The transaction will be documented on your monthly bank or credit card statement. You will receive an end-of-the-year summary for tax purposes.



## It's Easy to Get Started!

- 1- Use the attached enrollment form to begin the process. Indicate the amount you wish to give each time, and whether you would like your gift to be made on a monthly or quarterly basis.
- 2- Indicate the ministries you would like to support through your gift, then read and fill in the rest of the agreement. **Please be sure to sign** and date the form.
- 3- Return your completed enrollment form with your check for this month's gift (for checking account transfers) or credit card information (for credit card transfers) in the envelope provided. Your first direct gift will be transferred within 4-6 weeks.

Remember, you may increase, decrease, or suspend your giving at any time by writing to:



Latin America Mission  
PO Box 52-7900  
Miami, FL 33152-7900

Or e-mail us at: [donorservices@lam.org](mailto:donorservices@lam.org)

For questions, call 1(800) 275-8410, ext. 32

(Please allow 4-6 weeks for changes to take effect.)

### Record your gift amount here and retain for your records

\$ \_\_\_\_\_  monthly  
 quarterly  
 one-time

Date enrollment form sent in: \_\_\_\_/\_\_\_\_/\_\_\_\_

*All gifts provided to Latin America Mission originating as ACH transactions comply with U.S. law.*

## Automatic Contribution Program Enrollment Form

**Yes!** I would like to make my gifts through LAM's Automatic Contribution Program!

### I would like to contribute:

\$ \_\_\_\_\_  monthly  
 quarterly  
 one-time **[credit card only]**

For the ministry of:

1- \_\_\_\_\_ \$ \_\_\_\_\_  
 2- \_\_\_\_\_ \$ \_\_\_\_\_  
 3- \_\_\_\_\_ \$ \_\_\_\_\_

### I have enclosed a check for the current gift.

Please transfer my monthly/quarterly gifts from my checking account. I understand my future gifts will be transferred directly from my checking account to Latin America Mission.

OR...

### Here is my credit card information.

Please transfer my monthly/quarterly/one-time gift(s) from my credit card account. I understand that future monthly/quarterly gifts will be transferred directly from my credit card account to Latin America Mission.



Card #: .....

Expiration Date: \_\_\_\_ / \_\_\_\_  
mm yy

A record of my gifts will appear on my bank or credit card statement, and I can increase, decrease, or suspend my giving by contacting the Latin America Mission at [donorservices@lam.org](mailto:donorservices@lam.org)

### Please Print

Name .....

Address .....

.....

City ..... State ..... Zip Code .....

Phone .....

E-mail .....

X .....

Signature

Date

*All gifts provided to Latin America Mission originating as ACH transactions comply with U.S. law.*