



Team Balkan - Partner Sign-Up

Yes, I/We would like to partner with Al & Diane by
(please mark all that apply)

Praying for them at least weekly

Giving to: (See Below)

Giving Monthly Quarterly Annually to: (See Below)

Mellinger Support \$ _____

Country Support \$ _____

Church Planting \$ _____

Micro Loans \$ _____

St John's Home \$ _____

First _____ Last _____

Address _____

City _____ State _____ Zip _____

Phone _____

E-mail _____

Church _____

I would like to get the weekly e-mail prayer updates.

Funds to Support

Personal Support (MSA): This funds the missionaries monthly expenses for living in Bulgaria – this includes salary, housing, insurance, retirement benefits and other ministry related expenses.

Country Support (Bulgaria) (CSA): These are the funds needed to run on-going ministries in the country. Training events, scholarships, translation of materials etc.

Church Planting (EMP) - for \$300 a month you can sponsor a church planting project in Bulgaria.

Micro Enterprise Loans - help us get Businesses and Livelihood groups started

St John's Home is an anti-traffics home for at risk girl in Bulgaria.

How to give to one or more accounts from the front:

To give online go to almellinger.com - **Click on "Give"**

Or mark which fund(s) you want to give to, fill in the form (front and back) and return it to Al Mellinger or
Mail to: Free Methodist World Missions
770 N High School Drive Indianapolis, IN 46214-3756

Authorization Agreement for Electronic Funds Transfer or Credit Card Payments

I authorize Free Methodist World Missions to initiate withdrawals or charges from the banking account or credit card indicated below in the amount of \$ _____ beginning with _____ (month/year) and continuing until I notify Free Methodist World Missions to stop or for a specific time ending _____ (month/year). I understand I may cancel this arrangement at any time by contacting Free Methodist World Missions.

Electronic Funds Transfer
Electronic Funds Transfer (EFT) please enclosed a voided check for verification.

Credit Card Authorization

(check one) VISA Master Card Discover AM Express

Card _____ Name on _____

Card # _____ Expires: Mo _____ Yr _____

Signature _____ Date _____

The Free Methodist Church-USA commits that every reasonable effort will be made to honor your recommended gift designation. We (the donor) understand and acknowledge that FMC-USA has discretion to utilize this gift in a manner that best meets the needs of the church.

Thanks for for Partnering with us!