



HOW TO GIVE TO INTERFACE MINISTRIES

How to contribute to InterFACE Ministries staff:

1. Checks may be made payable to:
 InterFACE Ministries
 PO Box 450816
 Atlanta GA 31145-0816
Put staff name on a separate note.
 You will receive a receipt and return envelope.
 Or if you provide your email address, you may receive an e-receipt. This saves us postage!

2. Online as one time or recurring gifts from your bank account or credit card.
 - Go to www.iface.org
 - Click on [donate-to-iface](#). This will take you to a separate giving page where you can set up your contribution through [EasyTithe](#)
 - You will receive both an automatic and a monthly e-receipt and you can go online anytime to verify your data.

3. Or you may give by Electronic Funds Transfers with a debit from your bank account each month on the 15th. Any changes are made through our office, not online. See EFT instructions.

Please call our national office at 770-934-7797 if you have any questions, or email: lynn@iface.org

EFT Instructions:

Return this portion with your regular donation or a voided check. Your account will be drafted on the 15th of the month and you will receive a receipt every month. Still have questions? See below:

- *Can I choose a different date?* We can only make transfers on the 15th or the next business day thereafter if it falls on a holiday or a weekend.
- *What do I need to do if I change banks?* Just send us a voided check from your new bank.
- *What if I want to change my contribution?* Just send us a note or email requesting the change to a new amount prior to the 10th of the month.
- *What else do I need to do?* Nothing. We will take care of the rest.
- *How do I end the transfer?* If you wish to terminate your transfer, please call us or send an email to lynn@iface.org

Electronic Funds Transfer Request

I authorize you to make the following transfer for the support of:
 _____(staff/project name)

Please attach a voided check from your account to this form, or a check with your regular donation.

Month you want to start _____

Amount to be transferred \$ _____

from () Checking or () Savings

Please list all names on this account.

Name _____

Signature _____

Name _____

Signature _____

Address _____

City _____ State _____ Zip _____

Email _____

Daytime Phone _____