



Florida General Baptist Convention, Inc.

Rev. Dr. James B. Sampson, President

CONTRIBUTION FORM

DISASTER RELIEF \$ _____ FOREIGN MISSION \$ _____ HOME MISSION \$ _____

CHECK # _____ CASH = \$ _____ TOTAL = \$ _____

Name _____

Address: _____ City _____ Zip _____

Telephone: () _____ Email: _____

Church Name: _____ Address: _____

City: _____ Zip: _____ Telephone: _____

Pastor: _____ District: _____

(FGBCI Office Use Only)

Finance Staff Signature: _____ Check No. _____ Amount: \$ _____ Cash: _____

White Copy - Hdqtrs. Office

Yellow Copy - Receipt

(Revised 2/10)



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