

YES I WANT TO HELP PROMOTE MISSION IN AND FROM IRELAND

Please complete the form and place it in an envelope addressed to **iMap, 86 The Fairways, Castletroy, Limerick.**



Ministry / Mission for intended support: **Child Evangelism Fellowship of Ireland**

STANDING ORDER – IT COULDN'T BE EASIER Please ensure that you have completed the name and address section	NAME AND ADDRESS	NOTES
<p>To the Manager of</p> <p>Bank name: <input type="text"/></p> <p>Full address of your bank</p> <p><input type="text"/></p> <p><input type="text"/></p> <p><input type="text"/></p> <p>Name(s) of account holder(s)</p> <p>1) <input type="text"/></p> <p>2) <input type="text"/></p> <p>Account No <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>Sort Code <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>Please pay a monthly donation to:</p> <p>Account: iMAP (Irish Mission Agencies Partnership)</p> <p>Branch: AIB 140 Lower Drumcondra Road, Dublin 9</p> <p>Account No: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>Sort Code: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>Reference: Indicate TO and FROM</p> <p>TO CEF <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>The sum of:</p> <p>€21 <input type="text"/> €50 <input type="text"/> €100 <input type="text"/> Other € <input type="text"/></p> <p>Amount in words</p> <p><input type="text"/></p> <p>Beginning on <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>Additional instructions:</p> <p><input type="text"/></p> <p>Signature: <input type="text"/></p> <p>Date: <input type="text"/></p>	<p>Title: <input type="text"/> Name: <input type="text"/></p> <p>Address: <input type="text"/></p> <p><input type="text"/></p> <p><input type="text"/></p> <p>Daytime Tel: <input type="text"/></p> <p>Evening Tel: <input type="text"/></p> <p>Mobile: <input type="text"/></p> <p>Email: <input type="text"/></p> <p>PAYE No. <input type="text"/></p>	<ol style="list-style-type: none"> 1. If you donate over €250 in the year (€21 per month) and you are a PAYE worker or self assessed, missions can claim back the tax on all these donations received after 1 January 2010, significantly increasing the impact of your donation at no extra cost to you. 2. Please tick this box if you are a PAYE taxpayer. <input type="checkbox"/> 3. We would like to keep you informed about our events. However if you would rather not receive such information please email info@imap.ie 4. Please return this form to iMap who will receipt your standing order and forward it to your bank. Sending your standing order directly to your bank prevents us from receipting it and linking it to your supporter information for tax purposes.
<p align="center">ALLOCATION INSTRUCTIONS</p>		
<p>Please allocate my monthly donations (and any tax refunds) to:</p> <p><input type="checkbox"/> Child Evangelism Fellowship of Ireland for</p> <p><input type="checkbox"/> a specific project (please specify) _____ or</p> <p><input type="checkbox"/> a particular missionary (please specify) _____</p> <p>If you would like to divide your gifts among several mission organisations (or projects or missionaries) please attach clear instructions on a separate sheet. Thank you.</p>		



iMAP will process and forward your donation according to your allocation instructions. Donor forms are available on www.imap.ie