Helping Hands Ministries Donation Form

(for Soul Care Ministries and Nathan Shattuck)

Helping Hands Ministries is a tax-exempt 501(c)3 ministry established in 1996 that distributes millions of dollars per year assisting individuals in need, startup ministries, foreign organizations providing charitable work, and others spreading the Gospel of Jesus Christ.

- All contributions to Helping Hands are tax-deductible.
- Based on the stated mission of the recipient ministry partner of Helping Hands you wish to donate to, as well as the ethical, moral, and legal aspects involved, Helping Hands Ministries, Inc. provides you the opportunity to provide that person or organization a financial gift.
- Once Helping Hands Ministries, Inc. has received a donation, the donor will receive a printed receipt in acknowledgement of the gift within ten (10) business days.
- Individuals or groups receiving grants and awards from Helping Hands Ministries, Inc. adhere to strict guidelines of accountability. We provide you the assurance that your funds are being directed in accordance with our strict standards.
- Regardless of the size of the intended gift, there is a nominal 8% fee on all gifts received to cover administrative expenses. Our goal is to expedite gifts so that the recipients have immediate use of the intended funds. Your contribution helps our ministry and allows us to honor and help those worthy of assistance and recognition.
- Helping Hands can set up regular contributions or you can donate stock, via a Will, or any other asset that 501(c)3 non-profits typically receive.

1. Directions for Sending Your Donation

You can fax this form to Help	ing Hands at the following Fax # : (706) 754-9247
or mail the form to us at:	Helping Hands Ministries
	101 Main Street
	P.O. Box 337
	Tallulah Falls, GA 30573

	The Soul Care Ministries Accomportant: Mark which of the S		uld Like to Donate To: ounts you wish your donation to go to)
(fo	The Soul Care Assistance Fuor Counseling & Spiritual Direction Scho		The Nathan Shattuck Account (for developing Spiritual Formation Resources)
	Organization Contact person: N Organization Address: 77 E. Cr		uck, (678) 999–3951 ext. 1 Suite 207, Roswell, GA 30075
3.	Donor Name & Contact Inform	nation:	
	Name		
	Address		
	City	State	Zip

4.	Donation Instructions:
	I wish to donate the following amount \$
	I wish to give the gift anonymously: Yes No
	I wish the gift to be (check only one box):
	One Time
	Monthly (\$per month formonths)
	* I would like my credit card to be debited on the day of every month
	Other (\$)
5.	Donation Funds Source:
	l've included a check.
	I would like to charge it on my Credit/Debit Card:
	Card Type (Visa/Mastercard/Discover, etc.):
	Card #:
	Expiration (Month/Year): /
	* Feel free to call Helping Hands' main office at (706) 754-6884 if you'd prefer to convey your credit/debit card information over the phone, not faxed/mailed on this form.
	Other Type of Donation (please explain):
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о.	Donor Signature:
	Date:
7.	Notes (optional):
	(Is There Anything You Would Like Us To Convey To Soul Care Ministries With Your Donation?)