

CONTACT INFO:

Name _____

Address _____

City _____

State _____ Zip _____

Phone No. _____

Email _____

“Help us Fulfill God’s Vision for IHS”

Donate by **CHECK**, make payable to In His Steps Ministries;
 Donate by **TEXTING 601-300-6682** and follow prompts;
 Donate by **ONLINE www.inhissteps.org**, “DONATE TODAY”.
 A detailed list of needs can be viewed below.

CONTRIBUTION AMOUNT:

- \$25 \$50 \$100 \$200 \$500 Other \$ _____
 MONTHLY QUARTERLY ANNUALLY ONE-TIME

I want to support IHS:

- Additional Staff (1 Full-time & 2 Part-time)
- Camp Ground Payoff/Construction of 3 Cabins
- Sponsorship of S.P.A.S.E. Students
- General Operational Expenses

Bequest, stock or in-kind gifts welcomed. **PRAY FOR US.**
 Donations used for intended purpose, unless otherwise directed.

PLEASE RETURN THIS DONATION CARD WITH YOUR GIFT.

CONTACT INFO:

Name _____

Address _____

City _____

State _____ Zip _____

Phone No. _____

Email _____

“Help us Fulfill God’s Vision for IHS”

Donate by **CHECK**, make payable to In His Steps Ministries;
 Donate by **TEXTING 601-300-6682** and follow prompts;
 Donate by **ONLINE www.inhissteps.org**, “DONATE TODAY”.
 A detailed list of needs can be viewed below.

CONTRIBUTION AMOUNT:

- \$25 \$50 \$100 \$200 \$500 Other \$ _____
 MONTHLY QUARTERLY ANNUALLY ONE-TIME

I want to support IHS:

- Additional Staff (1 Full-time & 2 Part-time)
- Camp Ground Payoff/Construction of 3 Cabins
- Sponsorship of S.P.A.S.E. Students
- General Operational Expenses

Bequest, stock or in-kind gifts welcomed. **PRAY FOR US.**
 Donations used for intended purpose, unless otherwise directed.

PLEASE RETURN THIS DONATION CARD WITH YOUR GIFT.

CONTACT INFO:

Name _____

Address _____

City _____

State _____ Zip _____

Phone No. _____

Email _____

“Help us Fulfill God’s Vision for IHS”

Donate by **CHECK**, make payable to In His Steps Ministries;
 Donate by **TEXTING 601-300-6682** and follow prompts;
 Donate by **ONLINE www.inhissteps.org**, “DONATE TODAY”.
 A detailed list of needs can be viewed below.

CONTRIBUTION AMOUNT:

- \$25 \$50 \$100 \$200 \$500 Other \$ _____
 MONTHLY QUARTERLY ANNUALLY ONE-TIME

I want to support IHS:

- Additional Staff (1 Full-time & 2 Part-time)
- Camp Ground Payoff/Construction of 3 Cabins
- Sponsorship of S.P.A.S.E. Students
- General Operational Expenses

Bequest, stock or in-kind gifts welcomed. **PRAY FOR US.**
 Donations used for intended purpose, unless otherwise directed.

PLEASE RETURN THIS DONATION CARD WITH YOUR GIFT.



"Impacting lives for Christ"

IN HIS STEPS MINISTRIES, INC.

25th Year Celebration

P. O. Box 827
Canton, MS 39046
(601) 859-5708
www.inhissteps.org
jbacon@inhissteps.org
501(c)3 Nonprofit Organization



"Impacting lives for Christ"

IN HIS STEPS MINISTRIES, INC.

25th Year Celebration

P. O. Box 827
Canton, MS 39046
(601) 859-5708
www.inhissteps.org
jbacon@inhissteps.org
501(c)3 Nonprofit Organization



"Impacting lives for Christ"

IN HIS STEPS MINISTRIES, INC.

25th Year Celebration

P. O. Box 827
Canton, MS 39046
(601) 859-5708
www.inhissteps.org
jbacon@inhissteps.org
501(c)3 Nonprofit Organization