



CHRISTIAN WORSHIP HOUR

"CWH...A WORLDWIDE MINISTRY"

1623 6TH AVENUE SE, SUITE 1 • P.O. BOX 2002 • ABERDEEN, SD 57402-2002

TELEPHONE: 605-725-2770 • www.christianworshiphour.com

Dr. Harold E. Salem, Pastor, D. Min, L.H.D.



In good standing with the Evangelical Council for Financial Accountability (ECFA)

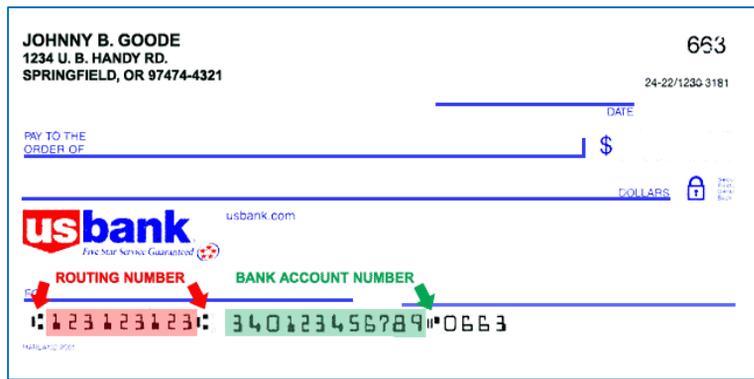
SOME STATIONS:

- ALASKA
Anchorage - KYES
- ARIZONA
Phoenix - KAZT
Tucson - KWBA
- CALIFORNIA
Eureka - KBVU
Palm Springs - KDFX
San Francisco - KTLN
- COLORADO
Colorado Springs - KWHS
Denver - KDCC
- FLORIDA
Ft. Myers - WRXY
Orlando - WACX
Tallahassee - WVUP
Tampa/Clearwater - WCLF
West Palm Beach - WFGC
- HAWAII
Honolulu - KWHE
- IDAHO
Boise - KYUU
- ILLINOIS
Chicago - TLN
Peoria - WMBD
Decatur - WLCF
- INDIANA
Indianapolis - WHMB
South Bend - WHME
- IOWA
Cedar Rapids/Dubuque - KFJB
Des Moines - KCWI
Sioux City - KPTH
- KANSAS
Topeka - MTKA
Wichita - KMTW
- KENTUCKY
Paducah - WDKA
- LOUISIANA
New Orleans - WHNO
Shreveport - KMSS
- MICHIGAN
Alpena - WBKB
Traverse City - WPBN
- MINNESOTA
Duluth - KBJR
Minneapolis/St. Paul - WUCW
Rochester - KTTC
- MISSOURI
Jefferson City/Columbia - KNLJ
Kansas City - KSMO
Springfield - KSPR
St. Joseph - KNPN

Dear Friend of the Christian Worship Hour:

If you would like to donate using your credit/debit card (or by having your donation taken directly out of your bank account without writing a check), please use this form to mail or fax your donation to the Christian Worship Hour. The Billing Address is the address where your bank or credit/debit card statement is mailed to.

If you would like to have your donation taken directly from your bank account by eCheck (without writing a check or using a debit card), the following image shows where to find your account and routing numbers. Please attach a voided check if you want donations deducted directly from your checking account or a deposit slip if donations are to come out of your savings account.



Please call our office if you have any questions. Thank you for your donation. God bless.

In Christ,

The Christian Worship Hour

BOARD OF DIRECTORS:

- | | | | | |
|------------------------------------|--------------------------------|--------------------------|--------------|------------|
| Hank Bowker
President/Secretary | Bill Edwards
Vice President | Kent Cutler
Treasurer | | |
| André Cobbs | Joan Ganje Fischer | Marie Hovland | Mark Johnson | |
| Amy Kessler | Pat Klabo | Dan Mardian | Mike Salem | Larry Sime |

- MONTANA
Billings - KHMT
Butte/Bozeman - KWYB
Great Falls - KFBB
Helena - KHBB
Missoula/Kalispell - KTMF
- NEBRASKA
Omaha/Lincoln - KPTM
Scottsbluff - KHSD
- NORTH DAKOTA
Bismarck - KBMY
 Fargo - WDAY
Grand Forks - WDAZ
Minot - KMCY
- OHIO
Zanesville - WHIZ
- OKLAHOMA
Tulsa - KWHB
- OREGON
Eugene - KEVU
Portland - KRCW
- PENNSYLVANIA
Philadelphia - Daystar
- SOUTH DAKOTA
Aberdeen - KABY
Pierre - KPRY
Rapid City - KOTA
Sioux Falls - KSFY
- TENNESSEE
Chattanooga - WFLI
Jackson - WJKT
- TEXAS
Abilene - KXVA
Beaumont - KJAC
San Angelo - KIDY
- WASHINGTON
Seattle - KSTW
- WISCONSIN
Madison - WIFS
- WYOMING
Casper - KCWY
Jackson Hole - KJWY
Sheridan - KSGW
- DOMESTIC
World Harvest TV
- INTERNATIONAL
Middle East TV
Shortwave Radio
Winnipeg, Canada
- NETWORKS
Daystar
CW+
CTN
INSP

Christian Worship Hour Giving Form

Please complete the top section for both credit/debit card **and** eCheck donations:

What type of donation are you making (please select one):

Memorial In Honor of Birthday Anniversary Heart of a Shepherd General

Who your memorial/dedication/birthday/etc. is for: _____

Name as it appears on your account: _____

Billing Address: _____

Address 1: _____

Address 2: _____

City: _____ State: _____ Zip: _____ Phone: _____

Your email address: _____

What TV Station do you watch CWH on? _____ Day/Time: _____

This is a one-time gift of \$ _____.

This is a recurring gift of \$ _____ on the _____ day of each month.

I understand that a Recurring Monthly Gift will be ongoing and will remain in effect until I notify the Christian Worship Hour that I wish to change or terminate this agreement.

Please give **either** your credit/debit card information:

For Credit Card or Debit Card donations:

Credit/Debit Card Type (Circle one): VISA MASTERCARD DISCOVER

Credit Card Number: _____

Expiration Date: _____ / _____ CVV: _____
Month Year The 3-digits to the right of the signature strip

Cardholder's Signature: _____ Date: _____

or your bank account information:

For eCheck donations (to be deducted directly from your bank account):

Routing # _____ Account Number _____

Bank Account Type (Circle one): CHECKING SAVINGS

Name of Your Bank: _____

Signature: _____ Date: _____

Please attach a voided check or a saving account deposit slip

Please **fax** your completed form to 605-725-2772 or **mail** it to:



CHRISTIAN WORSHIP HOUR
P.O. Box 2002
ABERDEEN, SD 57402-2002

