



The Florida Conference of
The United Methodist Church

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East Angola Missionary Support Form

MISSIONARY INFORMATION

Name: Cleivy (Benitez) Garcia Email: cleogarcia1969@gmail.com

COMMITMENT

Total amount per year:

Church (\$2,500 or \$5/member) Individual (\$500) Other amount: _____

Length of Covenant Relationship commitment: 3 years 1 year Indefinite

Together with our financial contribution we are providing our prayer support

SUPPORTING CHURCH INFORMATION

Name: _____

Address: _____

_____ District _____

Contact person: _____

Tel: _____ Email: _____

- Send financial support to the conference treasurer on the church's Apportionment Giving Report, under "Missionary support E Angola, Adv 100130"

OR

- Make check payable to "Florida Conference Treasurer" and send it to:
FLORIDA UNITED METHODIST CENTER
Attn: Icel Rodriguez
450 Martin Luther King, Jr. Avenue, Lakeland, FL 33815
(write "Adv#100130" on the Memo line)

Send this form by email to Icel Rodriguez at irodriguez@flumc.org
Or by regular mail to 450 Martin Luther King, Jr. Avenue, Lakeland, FL 33815