

A Ministry that Cares & Shares!



## Clinton McFarland Ministries

is a ministry of Partners, People just like you coming together working to get the word out. There are so many that live day by day and don't know the Joy of the Lord. Those of you that know the joy of the Lord, help us! Partner with us!

Maybe you don't know the joy of the Lord? You too can join us so that you may learn and help spread the word of God. Please write or call us.

Partnership with Clinton McFarland Ministries (CMM) involves a covenant connection. It is a commitment to assist Clinton McFarland Ministries with fulfilling its God-given destiny to impact the lives of millions by spreading the Gospel worldwide. Every soul that is saved and life that is changed through CMM is credited to the heavenly accounts of our Covenant Partners.



Clinton McFarland Ministries  
P.O. BOX 2835  
Columbus, MS 39704

Non-profit Organization  
U.S. Postage  
Certified Mail  
Permit No.

## Clinton McFarland Ministries



## WONDERFUL DAY

\* Every soul that is saved and life that is changed through CMM is credited to the heavenly accounts of our Covenant Partners.

\* By no means is partnership just an avenue through which to raise finances.

\* Covenant Partners are VIP's (Very Important Partners)!

Phone: 662-329-3288  
Fax: 662-328-2910  
[www.clintonmcfarland.org](http://www.clintonmcfarland.org)  
Email: [info@clintonmcfarland.org](mailto:info@clintonmcfarland.org)

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"Connecting our Partners Through

# Clinton McFarland Ministries

## What Is A Partner

A partner is "one who shares responsibility in some common activity with another individual or group."

A Covenant Partner of Clinton McFarland Ministries is "someone who is committed to this ministry and shares it's vision."



Partnership is "the relationship between people who support one another in the achievement of a common goal."

By no means is partnership just an avenue through which to raise finances. Instead, it involves a mutual exchange of faithfulness. Clinton McFarland Ministries faithfully and actively pray on behalf of our Covenant Partners daily. Covenant Partners of this ministry have a right to connect to the anointing that is on this ministry so they, too, can prosper spiritually, socially, mentally, physically, emotionally and financially.

Clinton McFarland and the entire CMM family strive to reciprocate in meaningful ways the commitment that our Covenant Partners show. We endeavor to provide first-class service and quality products. The CMM Family believes in our Partners therefore, all of our Covenant Partners are VIP's (Very Important Partners)!

## Our Part:

- Pray daily for God's blessings to be on you
- Study and diligently seek the Word of God
- Minister to you monthly through a personal newsletter from Clinton McFarland
- Furnish you with an official partner certificate
- Periodically offer special gifts for your spiritual edification and growth
- Provide quality customer service and products
- Be good stewards and operate with integrity and excellence

### Your Part:

- Attend meetings in your area
- Always pray for Clinton McFarland, his family and CMM
- Contact us periodically
- Actively strive to recruit new Covenant Partners
- **Support us financially with your monthly pledge:**  
***"Not because I desire a gift: but I desire fruit that may abound to your account" (Philippians 4:17).***  
***"For if the willingness is there, the gift is acceptable to what one has not according to what he does not have."***  
**(2 Corinthians 8:12)**

## CMM Partnership Application Form

Sign up for:	Price	Quantity	Total
<input type="checkbox"/> Partnership (\$300.00 per yr)	\$25.00/mt		
<input type="checkbox"/> Donation	\$0.00		
<input type="checkbox"/> CD	\$11.00		
<input type="checkbox"/> Tape	\$6.00		
<input type="checkbox"/> Video	\$16.00		
<input type="checkbox"/> DVD	\$21.00		

Sub Total: \_\_\_\_\_

10% off for CMM Partners

Total: \_\_\_\_\_

Name and/or Order # \_\_\_\_\_

Name (Last, First, Middle Initial) \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Birth date \_\_\_\_\_

Phone Hm \_\_\_\_\_

Phone Wk \_\_\_\_\_

E mail Address \_\_\_\_\_

☐ Female

Method of Payment

☐ Male

☐ Check

☐ Pastor

☐ Visa

☐ Minister

☐ MasterCard

☐ Other \_\_\_\_\_

☐ American Express

Credit Card # \_\_\_\_\_

Exp. date \_\_\_\_\_

Signature \_\_\_\_\_

Church/Organization \_\_\_\_\_

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