

2017

ESTIMATE OF GIVING

Weddington United Methodist Church



In grateful response to the blessings of God, we estimate our giving to the Glory of God through Weddington United Methodist Church to be as indicated below.

Name _____

Address _____

Phone _____

Email _____

- I would like giving envelopes.
- I have set up my recurring contribution online at weddingtonchurch.org/give.
- I would like to make my recurring contribution using a credit card or bank draft. My information is on the reverse side of this sheet.

Ministry and Missions

Funds support the missions, ministries and programs, such as local and global missions, adult, youth and children's programs, pastoral care and much more.

I would like to give:

\$ _____ Weekly
\$ _____ Monthly
\$ _____ Annually

My total estimate of giving to the Missions and Ministry plan for 2017:

\$ _____

Building Fund

100% of these funds are designated for debt reduction.

I would like to give:

\$ _____ Weekly
\$ _____ Monthly
\$ _____ Annually

My total estimate of giving for debt reduction for 2017:

\$ _____

Signature _____ Date _____



Authorization Form

Weddington United Methodist Church

73105292802

FOR OFFICE USE ONLY	ENVELOPE #	DATE
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Type of Authorization Form:

<input type="checkbox"/> New authorization	<input type="checkbox"/> Change banking/credit card information
<input type="checkbox"/> Change donation amount	<input type="checkbox"/> Discontinue electronic donation
<input type="checkbox"/> Change donation date	

Last Name _____ First Name _____

Address _____

City _____ State _____ Zip _____

Email Address _____

Date of first donation: ____ / ____ / ____	Frequency of donation: (please check only one) <ul style="list-style-type: none"> <input type="checkbox"/> Weekly – Mondays <input type="checkbox"/> Semi-Monthly – 5th and 20th <input type="checkbox"/> Monthly on the 5th <input type="checkbox"/> Monthly on the 20th 	Church fund designations and amounts: <ul style="list-style-type: none"> <input type="checkbox"/> Ministries and Missions \$ _____ <input type="checkbox"/> Building Fund \$ _____ <p style="text-align: right;">Total \$ _____</p>
Special Instructions: _____		

CHECKING / SAVINGS	<p>Please debit my donation from my (check one):</p> <p><input type="checkbox"/> Savings Account (contact your financial institution for Routing #)</p> <p><input type="checkbox"/> Checking Account (attach a voided check)</p>	<p>Routing Number: _____</p> <p><i>Valid Routing # must start with 0, 1, 2, or 3</i></p> <p>Account Number: _____</p> <p style="font-size: small;"> </p>
	<p>I authorize the above church to process debit entries to my account. I understand that this authority will remain in effect until I provide reasonable notification to terminate the authorization.</p> <p>Authorized Signature: _____ Date: _____</p>	

CREDIT CARD	<p>Please charge my donation to my (check one):</p> <p><input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> American Express <input type="checkbox"/> Discover Card</p>
	<p>Credit Card Number: _____ Expiration Date: _____</p>
	<p>Name on Card: _____</p>
	<p>Billing Address (if different from above): _____</p>
	<p>I authorize the above church to charge my credit card in accordance with the information above.</p> <p>Signature (as it appears on the credit card): _____ Date: _____</p>