



Annual Giving Campaign

2 0 1 6 - 2 0 1 7 *
* JULY 1, 2016 - JUNE 30, 2017

PLEDGE FORM	DONOR INFORMATION (please print or type)
NAME	
ADDRESS	
CITY, STATE, ZIP	
PHONE	
EMAIL	
PLEDGE INFORMATION	
 I (we) pledge a total of \$ 	to be paid:
□one-time payment □	weekly □monthly □quarterly □other
I (we) plan to make this co.	ntribution in the form of:
□cash □check □stock/	securities 🗆 bther
Please check one of the two	boxes below if you are including a payment:
☐ The payment includ	ed is for the 2015-2016 pledge year (July 1, 2015 – June 30, 2016)
☐The payment include	ed is for the 2016-2017 pledge year (July 1, 2016 – June 30, 2017)
• Check this box □YES if you	are interested in talking to someone about making a gift to the congregation via your estate.
Signature(s)	Date
This pledge is a statement of intention that remains valid until modified in writing.	

Office use: Office___ Canvass___ CMS___ T.Y.__ Payment check #____ Date received____ Amount____