

Estimate of Giving Card

DONOR NAME:	
STREET ADDRESS:	
CITY/STATE/ZIP:	
DONOR PHONE:	DONOR EMAIL:
YEARLY ESTIMATED GIVING TO MINISTRY BUDGET:	
YEARLY ESTIMATED GIVING TO	
YEARLY ESTIMATED GIVING TO	
YEARLY ESTIMATED GIVING TO	
FREQUENCY: Weekly Bi-Weekly Monthly Other:	
PLEASE EMAIL THE COMPLETED ESTIMATE OF GIVING TO:	
TO SET UP RECURRING ELECTRONIC GIVING, GO TO:	

Thank You!