My/Our Investment in Ministry and Mission

This represents my/our financial intention for **2025** in response to God's call to generosity.

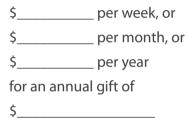
I/we realize this is an estimate of giving and it may be adjusted at any time.



ADDRESS

NAME(S)

EMAIL





- ☐ I/We are making a giving commitment for the first time
- □ I/We made our 2025 commitment online
- □ I/We will pay by automatic giving (complete the reverse side or set autopay up through your bank)
- ☐ I/We have included Christ Church in our estate plans

☐ This is a continuing bank draft fr	rom 2024. My/our account informatio	n has not changed (you do not need to	o complete anything else).
☐ This is my/our authorization to C	Christ Church United Methodist (fede	ral tax ID 61-0449611) to automatically	debit my/our
□ Checking <u>or</u> □ Savings acco	ount Account Number	at Financial Institution (including city, st	tate) Bank Transit/ABA No.
This draft is in the amount of \$		weekly, bi-weekly oni.e. the 10th), or semi-monthly (15th a	· ·
This authority will remain in effect until I file a new Authorization Form or cancel my participation. It is non-negotiable and non-transferable. I understand that this authorization will be in effect until I notify my financial institution in writing that I no longer desire this service, allowing it reasonable time to act on my notification. I also understand that if corrections in the debit amount are necessary, it may involve an adjustment (credit or debit) to my account.			
against my account, I have the right which I was sent a statement of ac	ht to have thé amount of the éntry cr	edited to my account by my financial ir or 45 days after posting, whichever oc	arged. If an erroneous debit entry is charged nstitution, if, within 15 days following the date on curs first, I give my financial institution a written
Signature		Please attach a voided of	check (checking) or savings deposit slip (savings)