



**“ALL IN!”
2017 ESTIMATE OF GIVING**

I/We will answer God’s Call by going “All In” for the CUCC of St. Charles this upcoming year.

Name(s): _____

Our Estimate of Giving for 2017 is:

Address: _____

\$ _____ per week (52 weeks)

City, State, Zip: _____

\$ _____ semi-monthly (24 periods)

Email: _____

\$ _____ per month (12 months)

Phone: _____

\$ _____ as follows:

Check here if you can make your contribution electronically and please see the reverse side for further instructions.

Signature(s): _____ Date: _____

Optional:

Recurring Electronic Funds Transfer Authorization

I wish to support stable cash flow for the church by making my contribution (as stated on my 2017 Estimate of Giving) using recurring electronic funds transfers. By signing below, I authorize the Congregational United Church of Christ of St. Charles to initiate a recurring automatic debit to the bank and account as indicated below. I further authorize the church to initiate credits to my account to correct any errors. This authorization shall remain in effect unless and until I notify the church in writing otherwise.

Please choose one and sign on that line only:

1. I authorize a debit each Monday (for weekly contributions): _____ OR
2. I authorize a debit on the 1st and 3rd Monday of each month (semi-monthly): _____ OR
3. I authorize a debit on the 1st Monday of each month (monthly): _____.

Banking Information

Please use my 2016 bank account information already on file with the church.

-OR-

I have attached a voided check from the bank account I wish to use for my automatic withdrawals.

Note: If you need to make changes to this information at any time, please contact the church office. If a withdrawal date coincides with a bank holiday, the withdrawal will process on the next bank business day. Withdrawals will begin in January of 2017 unless otherwise specified.

