



PLEDGE CARD

Name _____

Address _____

City _____

State _____ Zip Code _____

I/We plan to give \$ _____ each week month

for an annual total of \$ _____ towards our mission and ministry.

I/We understand that this pledge can be changed at any time.

Signature _____ Date _____

Electronic Funds Transfer Authorization

Please indicate the frequency and amount of the automatic withdrawal:

Monthly on the 1st of the month: \$ _____; Monthly on the 15th of the month: \$ _____

Semi monthly: 1st AND 15th of the month: \$ _____ \$ _____

_____ Use 2021 bank account information currently on file; **or**

_____ **Attach a voided check or savings deposit slip** for the account from which withdrawals will be made. Withdrawals will begin January 2022 unless otherwise specified.

I authorize Advent United Methodist Church and Tithely Services 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.

Authorizing Signature: _____ **Date:** _____