

2017 Financial Commitment

Questions about this form?
Contact Susan Zidar, Finance Manager, at 734-662-4466, ext. 344

Please Print

Name(s) _____ Today's Date _____

- Please send me/us information about giving stock to First Pres.

Have you considered Legacy Giving?

- Please send information about including First Presbyterian Church in my/our will or estate plan.
 We have included First Presbyterian in my/our will or estate plan.

2017 FINANCIAL COMMITMENT

My/Our Total Annual Commitment for 2017
is \$ _____

Please check all that apply:

- Please provide offering envelopes:
____ weekly
____ monthly

Giving Guidelines

Annual Income	Monthly Income	Monthly Giving			
		3%	5%	7%	10%
25,000	2,803	63	104	146	280
40,000	3,333	100	167	233	333
75,000	6,250	188	313	438	625
90,000	7,500	225	375	525	750
115,000	9,583	288	479	671	958
150,000	12,500	375	625	875	1,250
250,000	20,833	625	1,047	1,458	2,083

AUTOMATIC WITHDRAWAL SECTION

- We wish to pay our 2017 commitment using automatic withdrawal from the following account:
 Checking Savings Credit Debit

Please complete the section below:

Name as it appears on account _____

I authorize First Presbyterian Church of Ann Arbor to keep my signature on file and to deduct from my account for the payment of my/our commitment. I direct that the sum of \$ _____ be deducted from my account every:

- Month Quarter Half-Year Year

Please complete **EITHER** the Checking/Savings section **OR** the Credit/Debit Authorization Section below.

Checking/Savings Withdrawal Authorization

This is the preferred payment option because there are no bank fees.

Bank Routing # _____

Account # _____

Credit/Debit Card Authorization

The credit card company deducts a processing fee.

Card # _____

Expiration Date _____

- I would like to make a **ONE-TIME AUTOMATED PAYMENT** in the amount specified below to the following PC(USA) special offerings:

_____ One Great Hour of Sharing - April 14, 2017 _____ Pentecost - June 2, 2017

_____ Peace & Global Witness - September 29, 2017 _____ Christmas Joy - December 16, 2017

By signing this authorization, I confirm my understanding that I control my payments, and if at any time I decide to discontinue this service, I will notify the church and request cancellation. I understand all information provided will remain confidential.

Signature: _____