



Belonging: Being a Community in the Image of God

We thank you for your generous acceptance of stewardship and pray you may find the level of giving that is right for you as you experience belonging in the Body of Christ through Christian generosity. Your Estimate of Giving and contributions are a critical part of how we can make a difference in our church, our community, and our world.

Please complete this estimate of giving card, and bring it to one of our Consecration Services, October 22 or October 29. You may also place it in the offering plate or return it to the church office. You may change your commitment at any time by notifying our office.

If you have questions regarding this card, call 910-579-5753.

Electronic Funds Transfer

Electronic Funds Transfer (EFT) is both a convenient and reliable way to fulfill your financial commitment to the church. EFT is also the most cost-efficient method of giving to the church since it reduces administrative costs and helps maintain a predictable cash flow. To choose EFT, simply complete the form on the back or request a form at wmatthews@seasideumc.org



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Name (Please Print): _____
Address: _____
City/State/Zip: _____
Email: _____
Home Phone: _____



Yes! I/We will support Seaside United Methodist Church 2018 Operating Budget.

PLEASE CHOOSE ONE & ENTER AN AMOUNT:
\$ _____ weekly for 52 weeks
\$ _____ semi-monthly for 24 periods
\$ _____ monthly for 12 months
\$ _____ as follows _____

Signature _____ Date _____

____ I/We would like information on how to provide for Seaside United Methodist Church in my/our will.



Electronic Funds Transfer Authorization

(optional)

Please indicate the frequency of the automatic draft.

- Weekly
- Semi-Monthly—Withdrawn on 1st and 15th of month
- Monthly—Withdrawn 1st of each month
- Monthly—Withdrawn the 15th of each month
- ____ Use our bank account info currently on file.
- ____ Attach a voided check for the account from which withdrawals will be made. Withdrawals will begin January 2018 unless otherwise specified. (For New EFT accounts only)

OR

____ Have the Financial Secretary Make the Changes for me
____ I will make my own adjustments online

Note: *All withdrawals will be on the indicated day unless it is a non-banking business day in which the withdrawal will take place on the next banking business day.*

Name (Please Print): _____
Address: _____
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