

More Than Stone Soup
Estimate of Giving Card

I (We) estimate our Financial Support for the year ___ _

to be \$_____ per [] week (or) [] month. (Check One)

I (We) have accepted the Growth In Giving Challenge,
or we are already Tithing. [] Yes [] No (Check One)

I (We) estimate our commitment of Time and Abilities

to be _____ hours per [] week (or) [] month. (Check One)

(Name)

(Phone Number)

(E-Mail)

These estimates are offered after prayerful consideration and are based on prevailing conditions at this present time. Should our situation change we understand that we can contact either Pastor or the Financial Secretary and adjust these estimates either up or down, as the case may be, for the remainder of the year.

(Signature)

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