



My Commitment to St. John's for 2021

lame			
address			
hone			
s part of my/our commitment to faith-fill	led generosity ir	n 2021, I/we pledge \$	annually.
lease provide pledge envelopes (circle or	ne) Yes No		
Please contact me about including	st. John's in my	estate plans.	
	Authorization for	or Direct Payment	
I/We hereby authorize St. John's Episcopal Church adjustment entries to my/our account at the financi			, if necessary, debit correction and
Type of Account (check one): □ Checking	ng 🗆 Savings	+	
Name of Financial Institution:			
Routing and Transit Number:	7	Account Number:	
Frequency of Direct Payment Withdrawal □ Semi-monthly (5th and 20th days of the	`	Monthly (5th day of the mont	ch)
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This authority will remain in full force and effect until the Parishioner(s) has/have given the Church written notification of its termination, with allowance for a reasonable time for the Church to act upon the notification.

Please attach a voided check or financial institution account verification letter to this form.