

# MUNHOLLAND UMC

## Estimate of Giving/Commitment Card

Name (Please Print) \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email: \_\_\_\_\_ Home Phone \_\_\_\_\_

- Yes! I/We will support Munholland UMC in the year 2012*

Choose One:

\$ \_\_\_\_\_ 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 Munholland UMC in my/our will.*

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### Electronic Funds Transfer Authorization

- Weekly – Withdrawn on Mondays
- Semi-Monthly – Withdrawn 15<sup>th</sup> and 30<sup>th</sup> of each month
- Monthly – Withdrawn first Mondays of each month
- Monthly – Withdrawn on the 15<sup>th</sup> of each month

\_\_\_\_\_ Use my bank account information currently on file.

OR

\_\_\_\_\_ Attach a voided check for the account from which withdrawals will be made.

Withdrawals will begin January 2012 unless otherwise specified.

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