

# 2018 Pledge

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Name(s) Please Print

I/we make the following commitment  
to increase support to Edmonds United  
Methodist Church in the year 2018  
by \$ \_\_\_\_\_

Choose One:

weekly for 52 weeks

semi-monthly for 24 periods

monthly for 12 months

as follows \_\_\_\_\_

Please mark this circle if this is a  
new pledge

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Signature

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Date

Contact Information

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Email

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Phone Number

Thank you for your pledge.  
Please continue to pray for God's mission  
and ministry through our church.

Edmonds United



Methodist Church