

2018 Pledge

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

Signature

Date

Contact Information

Email

Phone Number

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

Edmonds United



Methodist Church