



FIRST PRESBYTERIAN CHURCH
OF SANTA MONICA

*Transforming
Generosity*

2017 Pledge Commitment

Name(s): _____

Phone: _____

E-mail: _____

My pledge for 2017 is _____

To be paid:

Annually Monthly Weekly

I plan to pay by :

Cash or check Visa MasterCard

American Express Use card on file

Electronic funds transfer

Name as it appears on credit card:

Card number _____

Expiration date _____

Billing address of card _____

Signature _____