

Financial Generosity for God's Work
Through the Roxbury Congregational Church



Pledge for the Calendar year 2025

Please return this form to the Church on November 17, 2024 or mail it into the office.

Name: _____ Date: _____

If address has changed, please put the updated address below

Street _____ Town _____ ZIP _____

Total Amount Pledged for 2025: \$ _____

I/We will give (check one) Weekly _____
 Monthly _____
 Quarterly _____
 Yearly _____

_____ We will be giving electronically. If so, please fill out the reverse side

We prefer debits from your checking account as there are no service fees.

If you use an electronic payment, would you consider adding 3% on top to cover the service fees?

_____ We would like weekly Offering Envelopes

_____ We would like to become members of the Canfield Society and name the Roxbury Church in our will. Please contact me with information on how

Did you know that the Roxbury Church has an online giving page to conveniently and safely give your offering, set up re-occurring giving, memorial gifts, and special giving including disaster relief giving?

Go to: <https://secure.myvanco.com/L-Z252/home>

Roxbury Congregational Church
2025 Pledge
to make a difference!

Authorization Form
CHECKING PREFERRED
UCC0820



Current Envelope # _____ or N/A DATE

Effective date of authorization: _____

Type of Authorization Form: New authorization Change banking/credit card information
 Change donation amount Discontinue electronic donation
 Change donation date

Last Name First Name

Address Email

City State Zip

Date of first donation: **Frequency of donation:** (please check only one) **Church fund designations and amounts:**
 _____/_____/_____ Weekly – Mondays TOTAL Pledge 2025 \$ _____
 Semi-Monthly – 1st and 15th _____ \$ _____
Date of last donation (optional): Monthly on the 1st **Total** \$ _____
 _____/_____/_____ Monthly on the 15th Annual / One-Time

Special Instructions:
(Credit Cards charge 3%+ for that convenience, would you consider adding that to your pledge?)

CREDIT CARD

Please charge my donation to my (check one): | Visa MasterCard American Express Discover Card

Credit Card Number: Expiration Date:

Name on Card: Security PIN:

Billing Address (if different from above):

I authorize the above church and Vanco Services, LLC to charge my credit card for StillspeakingMoney® in accordance with the information above.
 Signature (as it appears on the credit card): _____ Date: _____

CHECKING / SAVINGS

Please debit my donation from my (check one): Routing Number: _____
 Savings Account (contact your financial institution for Routing #) **Valid Routing # must start with 0, 1, 2, or 3**
 Checking Account (attach a voided check if first time or different) Account Number: _____

I authorize the above church and Vanco Services, LLC to process debit entries to my account for StillspeakingMoney®. I understand that this authority will remain in effect until I provide reasonable notification to terminate the authorization.
 Authorized Signature: _____ Date: _____