

## **Annual Stewardship 2018**

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I/we will begin giving our gift on	and will continue giving:
\$ weekly for weeks	\$ monthly for months
Two semi-annual payments of \$	One time payment of \$
Or as follows:	
Name	Phone
Signature	Date

Please make checks or transfer securities to **Holy Spirit Episcopal Church**. For automatic deduction or direct withdrawl options, please see reverse side.