



# St. Victoria Parish Family Pledge Card

For July 1, 2023 to June 30, 2024

Please complete this form and return it to:

Jodee Korkowski

St. Victoria Parish Family

8228 Victoria Drive

Victoria, MN 55386

Email: [jkorkowski@stvictoria.org](mailto:jkorkowski@stvictoria.org)



Name \_\_\_\_\_ Env # \_\_\_\_\_ (if known)

Email \_\_\_\_\_

In response to God's many blessings, I/we pledge:

## Stewardship Pledge (Regular Weekend Offering)

A pledge of: \$ \_\_\_\_\_ per week, month, quarter, year (Please circle one)

## Free To Serve (Pay off mortgage + fund major projects)

*I also want to help pay off the mortgage*

and help fund major projects with my special gift of:

\$ \_\_\_\_\_ per week, month, quarter, year (Please circle one)

## Options for Electronic Giving:

\_\_\_ I already give electronically. Please use the same electronic information for my new pledge (amount specified on the reverse side) for the July 1, 2023 – June 30, 2024 fiscal year. (Signature needed on bottom of form)

\_\_\_ I am new to electronic giving: Please use the information below for my new pledge (amount specified on the reverse side) for the July 1, 2023 – June 30, 2024 fiscal year. (Signature needed on bottom of form)

## Please debit or charge my contribution(s) from my (check one box below):

☐ Checking Account: Routing Number: \_\_\_\_\_ Account Number: \_\_\_\_\_

☐ Credit/Debit Card: Credit/Debit Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Name on Credit Card Account: \_\_\_\_\_

Billing Address: \_\_\_\_\_

I authorize St. Victoria Church to either process debit entries to my checking account or to charge my card. I understand this authority will remain in effect until I provide written notification to terminate the authorization. (Please place this card in an envelope for confidentiality purposes.)

Authorized Signature: \_\_\_\_\_ Date: \_\_\_\_\_