



# St. Victoria Parish Family Stewardship Campaign

For July 1, 2025 to June 30, 2026

Please complete and return 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 the following:

## Stewardship Pledge (Regular Weekend Offering)

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

## Church Improvements

I also want to help fund church improvements 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, 2025 – June 30, 2026 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, 2025 – June 30, 2026 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: \_\_\_\_\_