

**The Federated Church**  
224 N. Union Ave., Fergus Falls, MN 56537  
218.739.3227

Estimated amount of giving \$ \_\_\_\_\_

***I/We will give:***

\_\_\_\_\_ Per Week \_\_\_\_\_ Per Month  
\_\_\_\_\_ Per Quarter \_\_\_\_\_ One time gift

***I/We will give through Direct Debit:***

***YES or NO***

*(complete ACH form and return it to the church office.)*

Printed Name \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

I would like information about the endowment fund \_\_\_\_\_

Fill out and keep this portion for your records

Estimate for year \_\_\_\_\_

Date \_\_\_\_\_

*Thank you for your commitment.*

*-Federated Church Stewardship Committee*

