

## 2024 Commitment Card

We're excited to join hands with you and commit to being **"All In"** in our community and world. Can we count on you to help us meet our goal of increasing our impact in 2024?

Name \_\_\_\_\_

Address \_\_\_\_\_

### Step 1: Choose your offering. Check One:

- ☐ I will give \$ \_\_\_\_\_ weekly, monthly, yearly. (circle one)  
☐ I am already tithing at my current giving level.

### Step 2: Direct your gift. Check One:

- ☐ I ask the church to prayerfully use my gift in the best way.  
☐ I want my gift to be used for specific things:  
\_\_\_\_\_ % to **Operations**  
\_\_\_\_\_ % to local, domestic and international **Missions**  
\_\_\_\_\_ % to maintain our church **Buildings**

### Step 3: Complete the reverse side for a convenient autopay option, and include a voided check. Return this card to church by November 5, 2023.

\_\_\_\_\_ *I am interested in autopay bank withdrawal.*

***We humbly thank you for joining this mission with Anderson Hills.***



(Please do not write  
in this space)

ENV# \_\_\_\_\_

TOTAL AMOUNT  
OF PLEDGES

O.F. \_\_\_\_\_

Mission \_\_\_\_\_

Building \_\_\_\_\_

### Autopay through the Christian Family Credit Union makes it easy for you — and helps our mission. Here's why:

- \* None of your offering is lost to bank fees.
- \* Your gift is automatically deducted from your account each week or month. No need to remember a check or cash on Sundays.
- \* You can choose the date that works best for you. (each Monday, or the 15th or 30th of each month)
- \* You can change your deduction plan at any time.

Please electronically transfer my offering to the church via the Christian Family Credit Union. (routing #241280582).

Please use my: ☐ Checking account ☐ Savings account (select one)

Beginning \_\_\_\_\_ (date), please deduct \$ \_\_\_\_\_

☐ Every Monday ☐ on the 15th of each month ☐ on the 30th of each month (select one)

Bank Name: \_\_\_\_\_

Routing Number \_\_\_\_\_ Account Number \_\_\_\_\_

**Remember to attach a voided check.**

I acknowledge and give permission to Christian Family Credit Union to originate ACH debits from my account. I acknowledge that the origination of ACH transactions from my account must comply with all applicable state and federal laws. I understand this authorization may remain in full force and effect until Christian Family Credit Union has received written notification from me of my desire to terminate this request and adequate time has been afforded to act on my request.

Signature: \_\_\_\_\_ Print Name \_\_\_\_\_ Date: \_\_\_\_\_