

Pledge and Payment Information

I/We are pleased to contribute the following pledge to the **Central Conference Pension Initiative**.

Total Pledge Amount: \$ _____ **Initial Payment:** \$ _____ **Balance:** \$ _____

Please mail my/our pledge reminders according to the schedule indicated below.

Beginning _____ (Month) _____ (Year), the balance of my/our pledge will be payable on the following schedule. *(Please check one.)*

Monthly Quarterly Twice a year Annually

I/We will fulfill my/our pledge over the period of the following years. *(Please check one.)*

_____ year(s) 3 years 4 years 5 years

My/Our pledge will be paid in the following manner. *(Please choose one method.)*

Check or Money Order

Credit Card *(Please check one.)* Visa MasterCard Discover American Express

Name as it appears on card: _____ Card No.: _____ Exp. Date: _____

Check here if you would like your credit card automatically debited according to your chosen pledge schedule.

Electronic Funds Transfer *(We will contact you for authorization.)*

**For recognition purposes, please print your name as you would like it to appear
in Central Conference Pension Initiative communications.**

Prefix	First	Middle	Last	Suffix
Address	City		State	ZIP code
Telephone	E-mail address		Church	
Signature				Date

I/We wish to make our gift in MEMORY or HONOR of: *(Please circle "MEMORY" or "HONOR.")* _____ *(Please print title and name.)*

I/We would like my/our pledge to remain anonymous.

Gifts are tax-deductible to the extent provided by law. For questions regarding a pledge, please call 847-866-4230. The Central Conference Pension Initiative is managed by the General Board of Pension and Health Benefits under the oversight of a multi-agency task force of The United Methodist Church.