E-Giving Program – Electronic Tithes and Offerings

Holy Temple Church has some good news to share! Your gifts made through the E-Giving Program work harder than ever to support the ministry. E-Giving is convenient, as well as safe, secure, and reliable!

When you participate in our E-Giving Program, your gift will be transferred conveniently from either your checking or credit card account directly to Holy Temple Church. A record of each gift will appear on your monthly statement. As a participant of the program, you are still free to make additional gifts by check or cash as the Lord provides!

CONTACT

Name(s) _____

Address_____

City _____ State _____ Zip Code _____

Telephone _____Email _____

GIFT INFORMATION

Please process my gift:
☐ **One-Time** ☐ **Monthly** ☐ **Two or more times each month****

On The:
☐ **1st** ☐ **5th** ☐ **10th** ☐ **15th** ☐ **20th** ☐ **25th Please process my first gift on: __/__/___ (mm/dd/yyyy)**

Please Apply my gift as follows:

☐ $ _____ **Tithes**	☐ $ _____ **Mother's Day**	☐ $ _____ **Father's Day** ☐ $ _____ **Fellowship Dinner**
☐ $ _____ **Offering**	☐ $ _____ **Disaster Relief**	☐ $ _____ **Pledge** ☐ $ _____ **Pastor Steve Love Offering**
☐ $ _____ **Mid-Week**	☐ $ _____ **Clergy Appreciation**	☐ $ _____ **Pastor Maggie Love Offering**

☐ $ _____ **Mortgage Burning**   ☐ $ _____ **Harvest Fest Candy**
☐ $ _____ **American Cancer Society**   ☐ $ _____ **VACON Registration**
☐ $ _____ **Holiness Union**   ☐ $ _____ **VACON Financial Plan**
☐ $ _____ **Men's Ministry**   ☐ $ _____ **VACON License Renewal**
☐ $ _____ **General Church**   ☐ $ _____ **Adult Sunday School Book (Small Print)**
☐ $ _____ **Beloved Child**   ☐ $ _____ **Adult Sunday School Book (Large Print)**
☐ $ _____ **Youth Ministry Snacks**   ☐ $ _____ **Adult Sunday School Book (Teacher's Commentary)**
☐ $ _____ **Marriage Ministry**   ☐ $ _____ **T-Shirts**
☐ $ _____ **Other** _(Please specify in comments)_ $ _____ **Total Donation Amount**

COMMENTS: _____

****Please choose at least two dates for Semi-Monthly gifts. Please note the <u>total gift amount</u> specified will be debited on each date selected.**

PAYMENT INFORMATION

☐ **Enclosed is a voided check for my gift**. **Please transfer my gift from my checking account. *OR***
     ****For One-Time Checking Account donations, please include a completed check with your donation form.**

☐ **My credit card information is listed below for gift. Please transfer my gift from my credit card.**   VISA MasterCard DISCOVER AMERICAN EXPRESS

Credit Card Number _____ Expiration Date ____ /_____

☐ **Yes! Please add the Processing Fee assessed to Holy Temple Church for me.**

I understand my future donations will be transferred directly from my account as stipulated above. I understand that I may increase, decrease, or suspend my gift at any time through the online donation form at www.holytemplechurch.net or by contacting Holy Temple Church by phone, US Mail or email. All donations provided to Holy Temple Church originating as Automatic Clearing House (ACH) transactions comply with U.S. Law.

> _**For Office Use Only**_
> $ _____ **Processing Fee Amount** _(3% amount for Credit Card gifts or $0.25 amount Checking Account gifts)_
> $ _____ **Total Donation Amount (required)** _(Donation Amount specified above + Processing Fee Amount)_

Signature (Required) _____ Date _____