

E-Giving Program – Electronic Tithes and Offerings

Name(s)				
Address				
City		tate Zip Code		
TelephoneEmail				
☐ To help reduce the printing costs incurred by First Baptist Church of giving envelopes.	of Fort Scot	t, I wish to n	o longer receive pre-printed	
I would like to make Recurring Gift as a:				
Weekly Gift - (processes every 7 days)				
Bi-Weekly Gift - (processes every 14 days)				
Monthly Gift <i>on the</i> $_{}$ 1 st $_{}$ 5 th $_{}$ 10 th	15 th	20 th	25 th of the month	
Please start my recurring gift on://(m				
OR				
I would like to make a One-Time Gift.				
	•••••	• • • • • • • • • • •	•••••	
Please make this a Donation Memorial Gift		Honor Gift		
In Memory/Honor of:				
Donation Assessed ©	•••••	• • • • • • • • • • • •	••••••	
Donation Amount \$				
Please apply my gift to:				
\$ General Contributions – 100		Building Maintenance Fund -1600		
S Deacon Fund Contribution - 300		Youth Fu	nd - 1400	
\$ Special Needs Fund - 2000	\$	Tim Davish Scholarship Fund		
\$ Memorial Contributions (specify in comments) -700	\$	Love Gift	- 800	
Comments:				
Enclosed is a voided check for my recurring donation. Please trans **For One-Time Checking Account donations, please include a complete OR My credit card information is listed below for my donation. Please	d check with	your donation	form.	
Credit Card Number		Ex	piration Date/	
I understand my future donations will be transferred directly from my account as stips suspend my gift at any time through the online donation form at www.fbcalive.org or mail. All donations provided to First Baptist Church of Fort Scott comply with U.S.	by contactin	g First Baptist		
ignature		Date		