Chain of Lakes CHURCH

4175 Lovell Road, Suite 115, Lexington, MN 55014 763-208-8049

Estimate of Giving Card

Please complete and return this form via the church offering baskets, mail to the address above, or return to the church office as soon as possible. The information below will also help to update our current records.

Family Profile Information		
Family Last Name		Primary E-mail
Address	City/State/Zip	Primary Phone

Individual Profile Information				
Family Member (First & Last Name)	Email Address	Cell/Work Phone	Date of Birth	Contact Preference (Phone/Email)
1.				
2.				
3.				
4.				

My/Our gift will be made as follows:

☐ Weekly ☐ Monthly ☐ Quarterly ☐ Semi-Annually ☐ Annually

☐ I will make my contribution through Automatic Withdrawal.

☐ Please give me form information about including Chain of Lakes in my Will.

My Estimate of Giving for 2013 is $_____

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My/Our gift will be made as follows:

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☐ I am interested in making my gift through Automatic Withdrawal. Please give me more information.

☐ Please give me form information about including Chain of Lakes in my Will.

My Estimate of Giving for 2013 is $_____