

Do	onor Information
Please provide the following in	nformation for correspondence and tax receipts
Name:	
Address:	
City:	Postal Code:
Telephone:	Email:
NOT THE REPORT OF THE PROPERTY	d in a Book of Thanks and Recognition.  your donation in memory of an individual or family
I wish to be recognized as a d	
Legacy Giving Information	
□ I have included Wesley-Kr	nox in my will or with other financial legacy gifts.
☐ I would like to speak with	a legacy gift planning consultant.
Charitable Receipt Informat For income tax purposes, a ch United Church and mailed to (Charitable Registration Number BN	aritable receipt will be issued by Wesley-Knox you early each new year
Please make cheques payable Wesley-Knox Growth Campa	

If you have any questions, contact Heather in the church office.

Mailing Address: 91 Askin Street, London ON N6C 1E7

Phone: 519-673-4803

Website: www.wesleyknox.com

## **Donation Pledge**

I would like to give to	o Building our I	uture with	n a pledg	e of:	
\$					
To be spread over: (cir	cle one) 1 year	2 years	3 years	4 years	5 years
Payment Schedule (ple	ase note that PA	R is available	le for mon	thly donation	ons only)
Monthly	Quarterly	Semi-Annually		Annually	
First payment to comm	nence on:				
Envelope Number:		Par Number:			
Method of Pay	ment (please	check one)			
Lump sum Cheque Payable to Wesley-Know					
☐ Pre-authorized Re If new, please pro			NTHLY)		
☐ Credit Card: VISA	or MasterCard	I			
Card Numbe	r;				
Expiry Date:					
Please sign and date I/We authorize the d purpose of the Wesle	raw from my/o	ur financia	l instituti	on accoun	nt for the
Print Name			Date		
Signature					

Your gift will help us to Build Our Future
Thank you for your generous support of our Growth Campaign