

Pledge Form

Please accept my/our pledge as a commitment of financial support to the First Congregational Church for the upcoming fiscal year.

\$ _____ per week

\$ _____ per month

\$ _____ per quarter

Other _____

Pledge year _____

I would like pledge envelopes Yes No

Please print and mail this form or drop it in the collection basket at the First Congregational Church.

Name

Address

City

State

Zip

Phone

Email

*First
Congregational
Church of Salem*

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