

# Pledge Card



NAME(S) \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

## Financial Stewardship Commitment for 20\_\_\_\_

Grateful for God's love in Jesus Christ, I (we) make the following commitment to support the mission of St. Philip's Episcopal Church:

\$ \_\_\_\_\_ per week / month / quarter / year

*This commitment may be increased or decreased due to changing circumstances by contacting the Treasurer.*

Go Paperless: I (we) agree to receive electronic pledge statements via email.

Email address: \_\_\_\_\_

Return to:  
St. Philip's Episcopal Church  
5038 Hyland Ave.  
San Jose, CA 95127

Detach and keep as a record of your commitment.

## Pledge Record

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