



## 2018 Stewardship Estimated Giving Card

I/we wish to support the ministries of Our Saviour's Lutheran Church.

I/we will give \$ \_\_\_\_\_

Choose one:

Per Week \_\_\_\_ Per Month \_\_\_\_ Per Year \_\_\_\_

Name (Print) \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

Envelope Number \_\_\_\_\_

\_\_\_\_ I/we understand I/we may adjust this estimate of giving at any time by contacting Jennifer Sevatson in the finance office at [jennifersevatson@oursaviours.com](mailto:jennifersevatson@oursaviours.com) or 630-281-4234.

\_\_\_\_ I have done my estimated giving online at [oursaviours.com/donate](https://oursaviours.com/donate) (Please fill in the information above)

\_\_\_\_ I/we would like to continue my/our automatic withdrawal through Simply Giving.