



2010 Pledge Card

Name of Church _____

Address and City of Church _____

Treasurer Name _____

Treasurer Phone and E-mail _____

Total dollar amount pledged to General Mission \$ _____

Please choose one of the following to direct your mission pledge:

___ Gifts are to be divided by the 2010 percentages (GA 33.5%, Synod 10%, MVP 56.5%)

___ Our gifts are to be divided in the following manner per our session:

GA _____ Synod _____ MVP _____

___ Our church is committed to support for mission, but has decided not to pledge a specific amount.

___ Pastor / Leader Pledges (do not need session approval)

Signatures: Pastor/Leader _____

Clerk of Session _____

Treasurer _____

Please return this card to MVP: 109 Stonecreek Rd. NW, New Philadelphia, OH 44663



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