

Glue Area

Let the Church always be a place of
mercy and hope, where everyone is
welcomed, loved and forgiven.

Diocese of Fargo
Office of the Bishop
5201 Bishops Blvd. S, Suite A
Fargo, North Dakota 58104-7605



PLEASE RETURN THIS
ENVELOPE IN
YOUR OFFERTORY
COLLECTION OR
MAIL WITH A STAMP

GOD'S GIFT APPEAL
DIocese OF FARGO
5201 BISHOPS BLVD. S, SUITE A
FARGO, ND 58104-7605



Please consider making a pledge to the GGA. Pledges may be paid in 8 consecutive payments or less.
Monthly reminders will be sent from April to November.
Stewardship models recommend that 5% of our income be returned to support our parish; diocesan ministries receive 1% and other charities 4%. Returning to God proportionate to our income is still good practice today.

MONTHLY	ANNUALLY	INCOME
\$12.50	\$100	\$10,000
\$25.00	\$200	\$20,000
\$50.00	\$400	\$40,000
\$75.00	\$600	\$60,000
\$100.00	\$800	\$80,000
\$125.00	\$1,000	\$100,000

GIFT GIVING GUIDE

Please remember to include a voided check and fill out the information on the other side of this card. Please tear off at perforation and enclose in envelope.

CREDIT CARD (DEBIT CARDS WITH MASTERCARD OR VISA LOGO ACCEPTED)

Please charge my God's Gift Appeal gift of \$ _____ to my: _____

Credit Card Number: _____ / _____ / _____ / _____ / _____ / _____ / _____ / _____

Cardholder Name _____

Please charge my credit card one time for the full amount of my pledge. Please charge my credit card \$ _____ per month until my pledge is paid in full.

Signature _____ Date _____

Please remember to fill out the information on the other side of this card. Please tear off at perforation and enclose in envelope.

AUTOMATIC WITHDRAWAL - monthly until pledge is paid in full

I authorize the Diocese of Fargo to withdraw \$ _____ automatically from my checking account monthly until my pledge of \$ _____ is paid in full.

You must include a VOIDED check.

Signature _____ Date _____

God's Gift Appeal

All that we are and all that we have comes from our loving God.
As good stewards of His gifts to us, we set aside and return to Him a
percentage of our income. As disciples of Christ, it is
part of our commitment to our faith.

Thank you for your generous support!

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God's Gift Appeal

Please print and fill in each line completely.

Name _____

Address _____

City _____ Zip _____

Check here if this is a new address

Phone _____

Parish _____

Email _____

Signature _____

I hereby make this gift/pledge solely for the ministries and uses
specifically identified in the God's Gift Appeal.

Please select one of the five options below:

One Time Gift

Pledge (**This is a 8 month pledge**)

Total Pledge \$ _____

Amount Enclosed \$ _____

Pledge Balance \$ _____

Please indicate pledge installments*

Checking Account Deductions (see reverse)

Credit Card (see reverse)

Contact me about gifts of stock