

**BETHANY UNITED METHODIST CHURCH
GIFTS and MEMORIALS**

Date _____

Donor Name _____ **Phone** _____

Address _____
Street City State Zip

Amount of Gift _____ Cash Check Stock ** Other **

(** Details of Stock or Other: _____)

Gift is () in Honor of () in Memory of () in Celebration of

Name(s)

Send Notice Card to _____

Street

City State Zip

Designation of Gift General Ministry of the Church Specific Purpose

House of Friends Respite Program

Specific Project Name

If the gift is restricted to a specific purpose, can the remainder be used for the general ministry of the church after that purpose is fulfilled? **Yes** **No**

Signature of Donor _____

Signature of Church Representative Receiving Gift _____

Signature of Trustees Representative _____