

## FWBC GIVING FORM

**Please print off, fill in giving information, and attach to your check.**



Member    Guest    Update my information

Member No. \_\_\_\_\_

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address:

\_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_ Phone No.: \_\_\_\_\_

**Tithes/Offerings**

Tithes \$ \_\_\_\_\_  
Offerings \$ \_\_\_\_\_  
Mercy \$ \_\_\_\_\_  
Missions \$ \_\_\_\_\_  
Building \$ \_\_\_\_\_  
Designated \$ \_\_\_\_\_  
Designated \$ \_\_\_\_\_  
Total \$ \_\_\_\_\_  
Check No.: \_\_\_\_\_

**Thank you**  
for generously supporting Fort Washington Baptist Church.

Please make all checks payable to FWBC.

You can also give online at [Givelify](#).