PLEDGE FORM

Good Samaritan Episcopal Church	**Diocese of Hawaii**
1801 Tenth Avenue	Bishop: The Rt. Rev. Robert L. Fitzpatrick
Honolulu, HI 96816	Vicar: The Rev. Dr. Keleawe Hee
Phone/Fax (808) 735-5944	Bishop's Warden: Betsy Hata
Email: goodsamhawaii@yahoo.com	Treasurer: Paul Jackson

Name(s): _____ _____

Address: _____ City: _____ State:_____ Zip:_____

Phone: _____ Email: _____

In thanksgiving for God's gifts of life and community here at Good Samaritan Episcopal Church,

I (we) would like to pledge (choose one of the following):

$ _____ per week x 52 = $ _____

$ _____ per month x 12 = $ _____

$ _____ per year x 1 = $ _____

Total pledge for the year 2026: $ _____

I (we) understand that as circumstances change and a change in the pledge is needed; I (we) will inform the church Treasurer, so adjustments may be made to my pledge.

Signature(s): _____ _____

We want to pray for you on your birthday and send you a card. Please fill in the following:

Birthday month: _____ day: _____ name: _____

Birthday month: _____ day: _____ name: _____

Mahalo nui loa for your commitment to Good Samaritan Episcopal Church. Please return this by mail or during the offering, by December 31, 2025.

Almighty God, whose loving hand hath given us all that we possess: Grant us grace that we may honor thee with our substance, and, remembering the account which we must one day give, may be faithful stewards of thy bounty, through Jesus Christ our Lord. Amen.

~ Blessings to you and your family ~