

**COMMITMENT FORM - West Virginia Annual Conference
Central Conference Pension Initiative**

*I/We are pleased to contribute the following pledge to sustain and encourage Church leaders in the central conferences by helping to provide a secure retirement future through the **Central Conference Pension Initiative**.*

PLEDGE DETAILS

Total Pledge Amount: \$ _____

Initial Payment: \$ _____

Balance: \$ _____

The balance of my/our pledge will be payable on the following schedule: *(Please check one)*

Annually Semi-Annually Quarterly Monthly

Beginning: Month _____ Year _____

I/We will fulfill my/our pledge over the course of: *(Please check one)*

_____ years 3 years 4 years 5 years

My/Our pledge will be paid in the following manner: *(Please check one)*

Check Other: _____

I/We wish to make our gift in memory / honor *(please circle one)* of: _____

PERSONAL INFORMATION

For recognition purposes, please print your name and/or name of your organization as you would like it to appear in Central Conference Pension Initiative communications.

Prefix _____ First _____ Last _____

Name of church or organization, if applicable _____

Address City State Zip _____

Telephone _____ Church Membership _____

Signature _____ Date _____

I/We would like my/our pledge to remain anonymous.

Please return this Commitment Form to:

Central Conference Pension Initiative

c/o Jim Berner, Conference Treasurer

PO Box 2469

Charleston, WV 25329

*For questions regarding a pledge, please call (304)344-8331 ext. 35 or
(800) 788-3746 ext 35.*

The Central Conference Pension Initiative is managed by the General Board of Pension and Health Benefits under the oversight of a multi-agency task force of The United Methodist Church