Gifts to Karismakirken

Thank you for your regular donations. The individual's generosity and willingness of each one in tithes and gifts is essential for Karisma Church. Regular gifts are the backbone of the church's finances and are crucial to what the church can offer in all departments: Children, youth, worship, mission, various other areas of the church work, wages for staff, along with maintenance and operations.

Give, and it will be given to you. A good measure, pressed down, shaken together and running over, will be poured into your lap. For with the measure you use, it will be measured to you. (Luke 6, 38)

Each of you should give what you have decided in your heart to give, not reluctantly or under compulsion, for God loves a cheerful giver. [8] And God is able to bless you abundantly, so that in all things at all times, having all that you need, you will abound in every good work. (2 Corinthians 9, 6-8).

Thank you for your gifts! You should also know that 10% of your gifts go "out of the house" to different and important needs from here to the ends of the earth.
Yours sincerely
The Council Leaders, and Irene and Tormod Røyland (pastors)

Fill out all the information required in this form and submit it to the church (in the offering, the mailbox in the vestibule or by mail / e-mail (scanned). 23% of the first 40,000, - per year of your gift, is approved by the government for tax credits. You will receive a record with annual statement by Karismakirken.

Should you wish for a tax deduction on your gifts, you MUST fill in your personal ID number (11 digits) on the form.

***PS**! We recommend that you set a maximum cover amount per month in case of any future amount adjustments. You will never be charged with more than the amount you sign up for.*

✂----------

Avtale Giro **Automatic payment of regular bills**

☑ **YES PLEASE!** _____ **PR. MONTH**

Cover amount limit pr month: If max cover amount is not set, the amount limit will be set at 5 000,- pr month.

Receiver	Recevivers account	Cover amount pr. month
Gifts Karismakirken	**2801 38 71584**	Kr. …..……

Charge my account nr. ☐☐☐☐☐☐☐☐☐☐☐

❑ I do not wish to recive notification of charge.

KID-nr. ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐
(KID-number is set by Karismakirken)

Name:…… Personal ID nr. 11 digits …….....

Address: ……..…

Zip code/place: ……

karismakirken

Place/date: …… Signature: ……

Send this contract in a closed envelope to:
Karismakirken, Adj. Hauglandsgt 52, 4022 Stavanger