



## ***The Hearts Center Monthly Check Tithe Pledge***

I am grateful to be able to support the current and ongoing growth of The Hearts Center!

Amount of monthly check pledge: \$ \_\_\_\_\_

Day of the month check will be mailed: \_\_\_\_\_

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

Address: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

The Hearts Center and the masters are truly grateful for your tax deductible donation.

May you be blessed many times over!

Please print this form and fax or mail it to The Hearts Center at:

PO Box 277  
Livingston, MT 59047

FAX: 888-476-5228