

# How will YOU Step Up to the Next Decade?

First Unitarian Church of Des Moines  
A Unitarian Universalist Church



Name(s):

Address:

City, ST Zip:

Member/Friend/Visitor

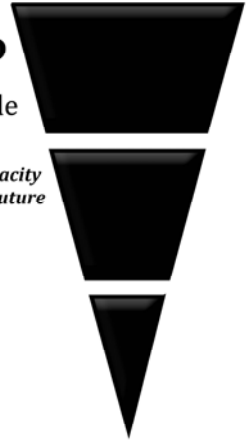
Env. #:

Home Phone:

Email:

**STEP UP**  
to the Next Decade

*Expanding our Capacity  
for the Future*



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**I/We will support our church with a financial contribution of:**

\$ \_\_\_\_\_ per month, to be paid in:

WEEKLY     MONTHLY     QUARTERLY    installments

**OR**

one **ANNUAL** payment in \_\_\_\_\_ .  
*Month/Year (between now & June 2013)*

**Pledge start date:**     Immediately    OR     July 1, 2012

Continue auto-payment on same account; OR

Start auto-payments based on completed form on back

**SIGNATURE(S):** \_\_\_\_\_ **DATE:** \_\_\_\_\_

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**Did you know...** *The First Unitarian Church Endowment Fund gives you an opportunity to help secure the future of First Unitarian. The Endowment Fund also provides funds for innovative programs and initiatives through REACH Grants.*

*To learn more about our church's endowment, check below.*

\_\_\_\_\_ Please contact me – tell me more about the Endowment Fund!

**AUTHORIZATION AGREEMENT FOR AUTOMATIC WITHDRAWAL OF FUNDS**

First Unitarian Church – General Fund

ES4552

|                                            |            |     |
|--------------------------------------------|------------|-----|
| Envelope # (leave blank if not applicable) |            |     |
| Last Name                                  | First Name |     |
| Address                                    |            |     |
| City                                       | State      | Zip |

|                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                 |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p><b>Please debit my contribution from my</b> (check one):</p> <p><input type="checkbox"/> Checking Account (attach a voided check)</p> <p><input type="checkbox"/> Savings Account (you may need to contact your financial institution for Routing #)</p> | <p>Routing Number: _____<br/><i>Valid Routing # must start with 0, 1, 2, or 3</i></p> <p>Account Number: _____<br/>⑆ ⑆ 23456789⑆ ⑆ 23 ⑆ 23456⑆ 000⑆<br/>└─── Routing Number      └─── Account Number      └─── Check Number</p> |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

|                                                                                                                       |                                                                                                                                                                                                                                                                             |                                                                   |
|-----------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------|
| <p><b>Date of first contribution:</b></p> <p>____/____/____</p> <p>We'll do our best to accommodate your request.</p> | <p><b>Frequency of contribution:</b> (check only one)</p> <p><input type="checkbox"/> Monthly on the 1<sup>st</sup></p> <p><input type="checkbox"/> Monthly on the 15<sup>th</sup></p> <p><input type="checkbox"/> Quarterly on the 1<sup>st</sup> (Jan, Apr, Jul, Oct)</p> | <p><b>Contribution amount:</b></p> <p>\$ _____ per withdrawal</p> |
| <p><b>Special Instructions:</b></p>                                                                                   |                                                                                                                                                                                                                                                                             |                                                                   |

**AGREEMENT**

I authorize the above church and Vanco Services, LLC to process debit entries to my account. I understand that this authority will remain in effect until I provide reasonable notification to terminate the authorization.

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

***Please staple voided check here.***