

# Second Unitarian Church of Omaha

3012 South 119<sup>th</sup> Street  
Omaha, NE 68144  
(402) 334-0537  
**2010-2011**

*Nurture the spark within  
to shine the beacon bright.  
Pass on the light.*

Donor Name(s) \_\_\_\_\_

*(Please print)*

Preferred Phone Number(s) \_\_\_\_\_

Preferred Email(s) \_\_\_\_\_

*The contact information above is requested for ready reference during the Stewardship Campaign and will not be shared with any other entity without your permission. If your address or other information has changed, please contact the Church office.*

**I/We commit \$ \_\_\_\_\_ to support the operating budget for 2010-2011.**

*Monthly installments from a bank account is the preferred way for our church to receive adequate income to cover monthly expenses such as salaries and utilities.*

**My/Our financial commitment will be fulfilled July 1, 2010 - June 30, 2011:**

(check one:)

**via monthly automated withdrawals from a bank account**  
*(Complete the ACH Form on the back and attach a voided check).*

**in one lump sum on \_\_\_\_\_**  
(date)

**via checks/cash throughout the year**

According to the Suggested Giving Guide my/our commitment is:

Full Tithe (10%)

Visionary Donor

Supporter

*It is understood that financial circumstances might change. If you need to revise your financial commitment at any time during 2010-2011 please contact the Treasurer of our congregation.*

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

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

**AUTHORIZATION AGREEMENT  
FOR PRE-AUTHORIZED DIRECT PAYMENTS  
FROM YOUR CHECKING ACCOUNT  
TO SECOND UNITARIAN CHURCH**

I (we) \_\_\_\_\_  
printed name(s)

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

hereby authorize SECOND UNITARIAN CHURCH to initiate debit entries to my (our) checking account indicated below and the depository financial institution named below, hereafter called DEPOSITORY, to debit the same to such account. I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of U.S. law.

Depository Name (Your Bank's Name) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Depository Routing # / ABA# - consists of 9 numbers \_\_\_\_\_  
(This is the first set of numbers on the bottom of your check)

Account Number - \_\_\_\_\_  
(The second set of numbers on the bottom of your check)

This agreement will have a start date of July 1, 2010 and an end date of June 30, 2011. The fiscal year for the church starts July 1<sup>st</sup>.

This authority is to remain in full force and effect during the time frame above. To terminate this agreement, Second Unitarian Church requires written notification from one or both of you in such time and manner as to afford Second Unitarian Church and Depository (your bank) a reasonable opportunity to act on it.

Amount to be withdrawn from my (our) checking account per month is: \$ \_\_\_\_\_

This amount will be withdrawn on (select one option):

the 2nd of the month

the 16th of the month

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

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

**PLEASE ATTACH A VOIDED CHECK**

Mail completed authorization form and voided check to:

Treasurer - Second Unitarian Church  
3012 S. 119<sup>th</sup> St  
Omaha, NE 68144

This document will be kept on file for 2 years past cancellation