



From the Heart

Unitarian Universalist Church in Eugene
2023-2024 Annual Stewardship Appeal

Household Information:

Name(s): _____

Address: _____

City/State/Zip: _____

Phone: _____ Mobile Landline

Email(s): _____

I/We pledge a total of \$_____ to support the 2023 - 2024 operating budget to be paid by June 30, 2024.

To help project cash flow, please indicate the schedule of payments:

Amount per period \$_____

Check one: ___ weekly, ___ monthly, or ___ in a single payment on _____
(Date)

___ My/Our household is unable to make a financial contribution this year, and would like to receive an exception to any financial obligation. However, I would like to maintain my membership by contributing my time and energy to the mission of this church.

Return this Form: Completed forms may be returned to the office via

- The PLEDGE drop box below the office window.
- By mail, addressed to:
UUCE Office, 1685 W. 13th Ave. Eugene, OR 97402.

All gifts are important and appreciated to sustain our faith and connections. Thank You!

Turn over to complete the second page, or back side of this form.

SIGNATURE(S) This pledge is made in good faith. I/we agree to complete this pledge unless I/we notify The UU Church in Eugene in writing of any changes or modifications. In the event that I/we are unable to complete this pledge, I/we will notify the Congregational Administrator, Izzy Crecca, at 541-686-2775x3 or office@uueugene.org

(signature)

(date)

(signature)

(date)

Ways to Donate (please check any applicable lines):

_____ **Online** at <https://uueugene.org/support/> (automatic deductions and credit card payments may also be set up here, completely at your control)

_____ **Automatic Deductions Start** or **Continue** (circle one) automatic bank account deductions. Automatic payments will be made based on the schedule outlined on pg 1, beginning **July 1** or **July 15**, 2022 (circle one). **A voided check is attached.**

_____ **By Check** Please make payable to 'UUCE' and write "annual pledge" in the memo line.

_____ **By Stock** To contribute through a stock, bond, mutual fund or similar equity transfer, please contact the UUCE Office.

THIS SECTION WILL BE REMOVED AND DESTROYED AFTER DATA ENTRY TO PROTECT CREDIT CARD INFORMATION

_____ **By Credit/Debit Card** (*per the schedule on pg1*).

Enter the information here.

Add 3% for processing costs? **Yes or No** (circle your selection)

Name on the card: _____

Card Number: _____

Expiration Date: _____ CCV Number: _____

Please keep a copy of this filled out document for your records!