

A pledge of support for 2019

First Congregational Church of Western Springs

"We take this church to be our church, promising so far as in us lies to share its work, sustain its worship, love its members and seek its unity, purity and increase."

- Our New Member Covenant

Best option: pledge online

Your pledge can be made securely online in Realm, our church record keeping program. This is simple to do and significantly reduces administrative costs. If you would like more information about Realm, contact jeannette@wscongo.org.

To pledge online through Realm, follow these steps.

1. Sign into Realm.
2. Click "Giving" on the main menu.
3. Click "+ Pledge", enter your pledge information for Pledge 2019 from 1/01/2019 until 12/31/2019, and **save**.
4. Schedule payments through automatic withdrawals or credit/debit card payments.
5. You may also enter a pledge, but pay by check.

At any time, you can log into Realm to check your giving records.

If you prefer to give stock or by check and/or prefer to turn in the traditional paper pledge form, please fill out the reverse side and bring this form with you to church or mail to: First Congregational Church, attention Nancy O'Brien, 1106 Chestnut Street, Western Springs IL 60558.

Thank you for supporting our community of faith.

traditional pledge options

First and last name: _____

I/We pledge _____ to the 2019 operating budget.

option one: gift of stock

Gifts of appreciated stock may avoid capital gains and income taxes; consult your tax advisor. Please indicate the name of the company's shares at this time if you are able.

I/We plan to make a gift of stock. _____

option two: pay by check

- A check for the total pledge is enclosed.
- I/We will remit payments during 2019.

option three: auto withdrawal

Changes to auto withdrawal are effective January 1, 2019. For all auto withdrawals, please complete the section below and attach a voided check.

- I/We wish to continue auto withdrawal, but increase the amount to _____
- I/We wish to continue auto withdrawal from last year, as is.
- I/We wish to begin auto withdrawal.

Name as shown on account: _____

Type of account: checking savings

9-Digit ABA routing number: _____ Bank account number: _____

Frequency of transfer:

- One-time (January 15th)
- Quarterly (January 15th, April 15th, July 15th, October 15th)
- Monthly, 1st of the month
- Monthly, 16th of the month

Amount of each transaction: _____

Authorizing Signature & Date _____