

# The Stillspeaking Initiative — Financial Commitment Form



Name(s) \_\_\_\_\_ Date \_\_\_\_\_  
(please print)

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code + 4 \_\_\_\_\_

Telephone \_\_\_\_\_ E-mail \_\_\_\_\_

<input type="checkbox"/> <b>I/We pledge \$</b> _____ <b>to The Stillspeaking Initiative</b>
<input type="checkbox"/> <b>Enclosed is a check/money order in the amount of \$</b> _____ <small>(made payable to the <i>United Church of Christ</i> noting <i>The Stillspeaking Initiative</i> in the memo)</small>
<input type="checkbox"/> <b>Stock Transfer</b> - Please send me/us stock transfer instructions.
<input type="checkbox"/> <b>Electronic Funds Transfer (EFT)</b> <input type="checkbox"/> Checking Account <input type="checkbox"/> Savings Account Bank Name _____ Location _____ Routing # _____ Account # _____
<input type="checkbox"/> <b>Credit Card</b> <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard  Credit Card # <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Cardholder's Name _____ Expiration Date ___/___/___

I/We authorize electronic transactions (Electronic Funds Transfer/Credit Card) according to the installment schedule defined below. I/we understand that future transactions may be terminated with a written request with 30 days advance notice.

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

**Installment Schedule:**

I/We intend to make payments on this commitment according to the following payment schedule:

- Monthly Amount \$ \_\_\_\_\_ (beginning on \_\_\_/\_\_\_/\_\_\_ concluding on \_\_\_/\_\_\_/\_\_\_)
- Quarterly Amount \$ \_\_\_\_\_ (beginning on \_\_\_/\_\_\_/\_\_\_ concluding on \_\_\_/\_\_\_/\_\_\_)
- Annual Amount \$ \_\_\_\_\_ (beginning on \_\_\_/\_\_\_/\_\_\_ concluding on \_\_\_/\_\_\_/\_\_\_)
- Other Schedule: Amount \$ \_\_\_\_\_ Dates: \_\_\_\_\_

**Mail or Fax to:** The Stillspeaking Initiative  
 Financial Development Office, 8th Floor  
 700 Prospect Avenue, Cleveland, Ohio 44115-1100  
 Telephone (800) 846-6822 / Fax (216) 736-2297

**Make a Gift Online:** [www.stillspeaking.com](http://www.stillspeaking.com)

