My Pledge



Name:	Phone:
Address:	
Email:	
Employer:	
O Brookings O Moody County	O Vermillion O Yankton
DONATION OPTIONS (You may dona	te to more than one category.)
O Annual Programming Campaign ○5 ○3 ○1 Year(s) Amount/year: Total pledge:	O Endowment 5 03 0 1 Year(s) Amount/year: Total pledge:
PAYMENT OPTIONS	_
OCash or Check	OStock or Crop Exchange
○ Credit Card	O EFT Deduction (Please attach a voided check)
name on card	name & address of financial institution
card #	checking or saving account #
exp. date 3-digit code on back	bank routing # (between : : on bottom left)
PAYMENT FREQUENCY	
Monthly First Invoice Month: (drawn on the 20th of each month for CC or EFT)	OAnnually Invoice Month: (drawn on the 20th of the month CC or EFT)
HONOR/MEMORIUM	
OIn memory OIn honor	
Signature:	Date:

GREAT FUTURES START HERE.