

Endowment Fund Commitment

With thankfulness to God and trust in his continued blessings, I (we) pledge to support . . .

Please check only one of the following boxes. To support more than one endowment, use additional form(s).

- | | |
|--|---|
| <input type="checkbox"/> WELS Ministerial Education Endowment Fund | <input type="checkbox"/> WELS Missions Endowment Fund |
| <input type="checkbox"/> WELS Luther Preparatory School Endowment Fund | <input type="checkbox"/> WELS Home Missions Endowment Fund |
| <input type="checkbox"/> WELS Michigan Lutheran Seminary Endowment Fund | <input type="checkbox"/> WELS World Missions Endowment Fund |
| <input type="checkbox"/> WELS Martin Luther College Endowment Fund | |
| <input type="checkbox"/> WELS Wisconsin Lutheran Seminary Endowment Fund | |

Name: _____ Spouse: _____
Title First Middle initial Last Title First Middle initial Last

Address/city/state/zip: _____

Daytime phone: _____ Evening phone: _____

E-mail address: _____ Home church: _____ Church city: _____

Employer: _____ Employer (spouse): _____ (To determine eligibility for matching gifts.)

Date of birth: _____ Date of birth (spouse): _____ Today's date: _____

Signature(s): _____ Counselor initials: _____

See back for giving options.



I want to support this WELS endowment fund through a . . .

_____ **One-time gift in the amount of**\$ _____

Payment method:

- Check made payable to WELS Foundation, Inc.*
- Credit card # _____ Exp: _____
- Other (stock gifts, real estate, etc.): _____

_____ **Recurring gift paid in installments:**

Installment frequency and amount (please select one):

- Monthly: \$ _____ each month for _____ months beginning _____, for a total recurring pledge gift amount of \$ _____
- Quarterly: \$ _____ each quarter for _____ quarters beginning _____, for a total recurring pledge gift amount of \$ _____
- Semi-annually: \$ _____ each half-year for _____ half-years beginning _____, for a total recurring gift amount of \$ _____
- Annually: \$ _____ each year for _____ years beginning _____, for a total recurring pledge gift amount of \$ _____

Recurring gift payment method (please select one):

- Check made payable to WELS Foundation, Inc.*
- Electronic Funds Transfer (Please enclose voided check. Processed on 20th of month.)
- Credit card # _____ Exp: _____ (Processed on 15th of month.)

* Employer guidelines for matching gift eligibility may require school as payee.

Please return to: WELS Attn: Jan Lampe, 2929 North Mayfair Road, Milwaukee, WI 53222