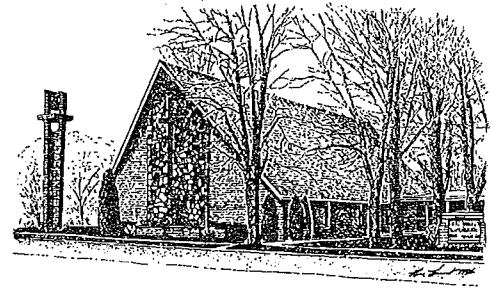


Saint Paul Lutheran Church

P.O. Box 708 • 214 Third Street Southwest
Pine Island, Minnesota 55963 • 507-356-8925



June 30, 2010

Dear Members of Saint Paul,

Saint Paul Lutheran is blessed to have dedicated members who participate regularly in worship, study God's word and do the work needed to share God's love in Christ with others. Thank you for your witness to the faith we share on account of the Gospel of our Lord and Savior, Jesus. God nourishes our life in this community of believers so that our mission will thrive and grow.

We regularly report how Saint Paul Lutheran Church stands financially through the weekly announcements, bulletins, and newsletters. Why? So that all may know how to respond to fulfill our mission. The gifts we have received to date for the General Fund budget are behind our expenses by nearly \$20,000. The Building Fund is close to being on track with a shortfall of \$2200 on \$21,400 owed through June 30.

Though we are greatly behind financially we are not in an unusual place for this time of year. As summer attendance dips so does giving, but unfortunately our expenses don't take the summer off. This leads to hard work through year end trying to catch up. Some years we make it, and some we don't. There are four opportunities to worship at Saint Paul each week during the summer. Please take advantage of that flexibility as you enjoy everything summer has to offer.

The electronic transfer program "**Simply Giving**" is available to everyone **at no cost**. Signing up allows you to designate the dollars you want to be automatically transferred from your account to Saint Paul each month. To do so, please **fill out the "Simply Giving" form** included on the back of this letter and return it to the church office. If you are participating, **please take this time to consider an increase to your monetary gifts as you are able.**

If you have any questions regarding your 2010 giving thus far, please e-mail Finance Secretary Heather Barker at heather.saintpaulpi@yahoo.com or leave Heather a message at the church office (356-8925) and she will contact you.

Thank you for your gifts of time, talents, and money to "**make Christ known**". Our theme: **God's Work, Our Hands** explains how that happens! Your gifts are yourself given for mission.


God's Peace,

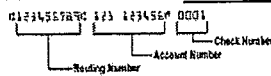
Mark Murray
Council President

Julie Baska
Council Vice President

Eric Barsness
Stewardship Committee

AUTHORIZATION FORM

The **Simply Giving** Program
 endorsed by
 Thrivent Financial Bank

FOR OFFICE USE ONLY	ENVELOPE/DONOR #	DATE						
Name of Church _____ Effective date of authorization: ____/____/____ Type of Authorization Form: <table style="display: inline-table; vertical-align: top; margin-left: 20px;"> <tr> <td><input type="checkbox"/> New Authorization</td> <td><input type="checkbox"/> Change banking information</td> </tr> <tr> <td><input type="checkbox"/> Change donation amount</td> <td><input type="checkbox"/> Discontinue electronic donation</td> </tr> <tr> <td><input type="checkbox"/> Change donation date</td> <td></td> </tr> </table>			<input type="checkbox"/> New Authorization	<input type="checkbox"/> Change banking information	<input type="checkbox"/> Change donation amount	<input type="checkbox"/> Discontinue electronic donation	<input type="checkbox"/> Change donation date	
<input type="checkbox"/> New Authorization	<input type="checkbox"/> Change banking information							
<input type="checkbox"/> Change donation amount	<input type="checkbox"/> Discontinue electronic donation							
<input type="checkbox"/> Change donation date								
Last Name		First Name						
Address								
City		State Zip						
Email Address								
Please debit my donation from my (check one): <input type="checkbox"/> Checking Account (attach a voided check below) <input type="checkbox"/> Savings Account (contact your financial institution for Routing #)		Routing Number: _____ <i>Valid Routing # must start with 0, 1, 2, or 3</i> Account Number: _____ 						
FIRST DONATION DATE: ____/____/____	FREQUENCY OF DONATION: <input type="checkbox"/> Weekly on _____ <input type="checkbox"/> Monthly on _____ <input type="checkbox"/> Semi-Monthly (transferred on 1 st and 15 th of each month)	FUNDS AND AMOUNTS: <input type="checkbox"/> General/Operating \$ _____ <input type="checkbox"/> Building \$ _____ <input type="checkbox"/> Evangelism/Outreach \$ _____ <input type="checkbox"/> Benevolence \$ _____ <input type="checkbox"/> Responision \$ _____ Total \$ _____						
AGREEMENT I authorize the above church and Vanco Services, LLC to process debit entries to my account. I understand that this authority will remain in effect until I provide reasonable notification to terminate the authorization. Authorized Signature: _____ Date: _____								

Please attach voided check here.