

I hereby authorize **Shelby County Community Outreach, Inc.** to debit my account in the amount of \$_____ per month. I understand that this authorization may be terminated by me at any time by written notification. My account information is as follows:

Bank Name: _____

Account # _____

Routing # _____

(An attached unsigned, voided **check** will supply this info)

Date each month transfer is to take place, beginning with the next date that occurs:

{ } 5th { } 20th

To revoke this authorization, contact:

(Please allow two weeks for this termination to be acted upon.)

SCCO, Inc.
PO Box 69
Harlan, IA 51537

X _____
(Bank account owner)

X _____
(Date)

Shelby County Community Outreach

Thanks for your interest in Shelby County Community Outreach. Below are some options of activities and skills which are occasionally needed to complete projects which we are involved in. Please circle which area(s) you have an interest in and return this card to us so we can add you to our data base of volunteers.

Name: _____ Phone: _____

Address: _____

Email: _____

AVAILABILITY: please circle the appropriate response

Best day / days of the week: Mon Tue Wed Thu Fri Sat

Time of day: morning afternoon evenings

Frequency: weekly monthly quarterly

SKILLS: please circle the appropriate response(s):

Framing	Painting	Yard Work
Siding	Carpet	Mowing
Roofing	Other Flooring	Housekeeping
Gutters	Finish Carpentry	Baking
Decks	Cabinets	Cooking
Concrete	Counter Tops	Sewing
Windows	Electrical	Child Care
Doors	Plumbing	Computers
Drywall	Heating/AC	Moving Team
Drywall Finishing	General Labor	Providing Rides

I would like to serve on a committee for: please circle:

Fund Raising/Public Relations	Counselling/Mentoring
Housing/Home Repair	Volunteer Coordination

SCCO can count on my financial commitment of:

\$_____ **Annually**

\$_____ **Monthly**