



Annual Dues Invoice - Payment by Direct ACH Debit

July 1, 2025 - June 30, 2026

Our club pays the dues for all its members to Rotary International (RI) and District 6000 on July 1st. Therefore, the due date for your submission of this form is **May 31, 2025.** Members who have not paid their dues by June 30, 2025, are subject to termination per RI guidelines.

Your prompt attention is greatly appreciated!

| NAME: | | | | | |
|-----------------|---|--|--|--|--|
| Emai | il | | Phone | | |
| | Please New or U _l | unt information has been previously submitted and is correct. ease fill out Amount and Signature Sections. or Updated account information. ** ease fill out ALL Sections. | | | |
| | Check from my employer (donation match) Include your name in the memo line of the business check and include with this invoice. | | | | |
| REGULAR MEMBERS | | | | | |
| | \$330 | Dues | | | |
| | \$100 | Rotary Distric | an Every Year (EREY) Donation to Rotary International. These funds support 6000 Community Service Grants and Rotary's international work. You will earate tax deduction notice from Rotary International for this. | | |
| \$ | | Optional – If | you would like to increase your EREY donation, please enter the amount here. | | |
| \$ | | Total | | | |
| <u>SENI</u> | | | Senior Status means your age and number of uninterrupted years as a Rotary member of any club. If this equals 100 or more, you qualify for Senior Status. | | |
| | \$230 | Dues | | | |
| | \$100 | Every Rotarian Every Year (EREY) donation to Rotary International. These funds support Rotary District 6000 Community Service Grants and Rotary's international work. You will receive a separate tax deduction notice from Rotary International for this. | | | |
| \$ | | Optional – If | you would like to increase your EREY donation, please enter the amount here. | | |
| \$ | | Total | | | |





| Amount Section | | | | | |
|--|--|---------------------------------------|--|--|--|
| \$ 7/1/202 | 5 Monthly (\$ Amount / | 12 Months) Annually | | | |
| Amount Beginnir | | · · · · · · · · · · · · · · · · · · · | | | |
| ACH Debit Section | | | | | |
| Depository Institution Name | Branch – if appli | cable or NA | | | |
| Depository Address | Depository City/State | Depository Zip Code | | | |
| | | Checking | | | |
| Routing Number | Account Number | Type of Account | | | |
| This authority is to remain in full fo | rce and effect unless Rotary Club of lo | wa City Noon (RCICN) has | | | |
| received written notification from(Rotarian name) of its termination in such | | | | | |
| time and manner as to afford RCICN and Depository a reasonable opportunity to act upon it. | | | | | |
| Signature Section (Deterior name) have by such actions Determ Clark of Laws City Near to | | | | | |
| (Rotarian name) hereby authorizes Rotary Club of Iowa City Noon to initiate debit entries to my account at the Depository Institution (as indicated above) and to credit the same to | | | | | |
| Rotary Club of Iowa City Noon. | at the Depository Institution (as indicate | ed above) and to credit the same to | | | |
| | (Rotarian name) hereby acknowledg | ges that the origination of ACH | | | |
| transactions must comply with the provisions of U.S. law. There is no charge for this service. | | | | | |
| Rotarian Name (print) | Signature | Date | | | |

PLEASE ATTACH A VOIDED CHECK or DEPOSIT TICKET TO THIS FORM

Please **send** this completed form to:

Rotary Club of Iowa City Noon P.O. Box 684 Iowa City, IA 52244