Endowment Form



"THE NAPFE ENDOWMENT FUND"

On August 14, 1992, the delegates to the 40th Biennial National Convention in New York City, by unanimous decision, voted to establish the NAPFE Endowment Fund. This was a spectacular moment in the history of this union. More than \$20,000 was pledged by the convention delegates.

The fund is to be endowed by voluntary contributions from Alliance members to provide financial security for the National Alliance. The goal is to raise \$1 million or more in a two year period with only the interest being used and not the principle.

This is a call to remind you to make good your pledge if you have not already done so, and to remind the members to make their contributions now.

The National Alliance will be eighty-four years old in October. For those 84 years, we have provided a quality presence for its membership. The endowment would greatly enhance that quality for this and the generations to follow.

Each member who contributes \$200 of more will receive a certificate from the National Office. Make your pledge today or better still send in your donation and let's surpass the stated goal of \$1,000,000. Remember also to complete the pledge you have already made.

Fill out the form below and send in your check now.

The National Executive Board National Alliance of Postal and Federal Employees

* Contribution to the NAPFE Endowment Fund is not tax-deductible

NAPFE ENDOWMENT PLEDGE (\$200.00 MINIMUM REQUESTED)

I,	SSN	Pledge \$	
to the NAPFE Endowment Fund to be re			
\$ Total payment enclos	sed \$	Per month until paid	in full
\$———— Per year until paid in	full		
Signature		Date	
Street Address or P.O. Box Number			_
City	St	ate Zip	_
(MAKE CHECK OR MONEY ORDER P NAPFE NATIONAL SECRETARY, 1628 DONATIONS TO THE NAPFE	3 11TH STREET, N.W., WA	SHINGTON DC 20001-5086)	
IF YOU CHOOSE TO HAVE YOUR PL ACCOUNT, PLEASE COMPLETE THE NAPFE NATIONAL SECRETARY, 1628 (DO NOT MAIL TO NAPFE FEDERAL C	FORM BELOW AND MAIL - 11TH STREET NW, WAS	L TO :	IT UNION
NAPFE FEDERAL CREDIT	UNION AUTHORIZATIO	ON TO RELEASE FUNDS	
I,	_, SSN	authorize the NAPFE	∃ Federal
Credit Union to withdraw \$	from my account	(one payment), (monthly), (pay	y period)
until my total pledge of \$	to the NAPFE End	lowment Fund has been satisfic	ed.
Signature	[Date	
Street Address or P.O. Box Numbe	er		
City	State	7in	