



# St. Catherine of Alexandria

CW 0219

Dear Father Sergio Ovando,

To support *PRESERVING OUR PAST, PROVIDING FOR OUR FUTURE*, I am/We are pleased to pledge over the next 5 years:

TOTAL PLEDGED: \_\_\_\_\_

INITIAL PAYMENT: \_\_\_\_\_

BALANCE: \_\_\_\_\_

<p><b>FORM OF PAYMENT:</b></p> <p><input type="checkbox"/> CHECK                      <input type="checkbox"/> STOCK</p> <p><input type="checkbox"/> CREDIT CARD              <input type="checkbox"/> EFT</p> <p><input type="checkbox"/> ONE ROSARY PER WEEK FOR THE SUCCESS OF THE 20-WEEK CAMPAIGN (20 ROSARIES TOTAL)</p> <p>I/WE WANT TO BEGIN PAYMENTS ON: _____</p>	<p><b>BALANCE TO BE PAID:</b></p> <p><input type="checkbox"/> ANNUALLY                      <input type="checkbox"/> SEMI-ANNUALLY</p> <p><input type="checkbox"/> QUARTERLY                      <input type="checkbox"/> MONTHLY</p>
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SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**THANK YOU FOR YOUR GENEROSITY.**

**DONOR INFORMATION:**

TITLE: \_\_\_\_\_ NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE: (\_\_\_\_) \_\_\_\_\_ E-MAIL: \_\_\_\_\_

WE WANT TO PUBLICLY RECOGNIZE ALL PARISHIONERS WHO SUPPORT THIS CAMPAIGN.

PLEASE CHECK THIS BOX IF YOU DO NOT WANT YOUR NAME IN PUBLIC RECOGNITION MATERIALS.  
(WE WILL NOT INCLUDE GIFT AMOUNTS.)

<p><b>MATCHING GIFT INFORMATION</b> <i>Complete ONLY if your employer will match your gift.</i></p> <p>Company Name: _____</p> <p>Address: _____</p> <p>City: _____ ST: _____ Zip: _____</p> <p>Phone #: _____</p>	<p><b>CREDIT CARD/ EFT INFORMATION</b> <i>Complete ONLY if you chose to make payments via credit card or Electronic Fund Transfer.</i></p> <p><i>To protect our donors' information, St. Catherine's will send instructions to complete credit card and EFT processing. You can also go directly to <a href="http://www.stca.org/pledgepayments">http://www.stca.org/pledgepayments</a> in the Giving Section of our website.</i></p> <p>E-mail: _____</p>
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