

WE GATHER • WE LEARN • WE SERVE

I/We PLEDGE \$ _____ TO BE PAID OVER 5 YEARS TO THE TOGETHER VISION.

My first payment will occur _____ (month/year).

I plan on making payments: monthly / quarterly / annually (circle one).

I have included a check for \$ _____.

Name: _____

E-mail: _____

(will not be shared with outside sources)

Parish: _____

Address: _____

Phone: _____

City/State/Zip: _____

Signature: _____

Please complete the front and back of this card.



METHOD OF GIVING

- Check/Cash Auto Withdrawal (ACH)*
- Other (i.e. Real Estate)*
- Stocks/Bonds*
- Credit Card Card Type _____
- Name on Card _____
- Number _____
- Billing Address _____
- City/State/Zip _____
- Expiration _____

Please use my/our gift where the Bishop sees the greatest need.

Please use my/our gift as follows:

\$ _____ Cathedral of the Immaculate Conception
Campus Renovation

\$ _____ St. Katharine Drexel Catholic School Fund Endowment

\$ _____ St. Maria de Mattias Endowment

\$ _____ Seminarian Education Endowment

Please contact me to discuss how to leave a gift to the Catholic Church in my will.

Comments: _____

**Non-cash pledges will receive a follow-up phone call from the Office of Development and Planned Giving to confirm the method of payment.*