



CAMPAIGN PLEDGE CARD

Building Our Faith: A Campaign for Saint Michael Parish

NEW PLEDGE

First Name _____

Last Name _____

Total Pledge: \$ _____

Initial Payment: \$ _____

Check # _____ Date: ___ / ___ / ___

Balance: \$ _____

Beginning: ___ / ___ / ___

I intend to pay my pledge over a multi-year period:

- 3-years
- 5-years
- Other _____

I intend to pay my pledge:

- Weekly
- Monthly
- Quarterly
- Annually

I intend to pay by means of:

- Check/cash
- ACH (electronic transfer, see form below)
- Online (www.stmichaellinc.org/donate)
- Other _____

*contact Bill Graeve, Business Manager at
bill-graev@cdolinc.net*

Please send reminders:

- Monthly
- Quarterly
- Annually

_____ / ___ / ___
 Parishioner Signature Date

**keep back copy for your records*

AUTHORIZATION AGREEMENT FOR AUTOMATIC GIVING - Please attach a voided check to this form

I / We, _____, hereby authorize Saint Michael Catholic Church to initiate debit entries, if necessary, credit entries and adjustments to my/our checking or savings account indicated below and the depository named below to debit the same such amount.

- Checking account
- Savings account

DEPOSITORY (please print)

Banking / Transit / Routing # _____ Bank Account Number: _____

Name: _____ Signature: _____ Date Signed: ___ / ___ / ___

Name: _____ Signature: _____ Date Signed: ___ / ___ / ___