



St. John Paul II University Parish  
A Campaign of the  
Advancement Foundation

I/We pledge to the **Faith, Formation, Future** Capital Campaign.

Signature (please type)

Today's Date \_\_\_\_\_

### SUGGESTED GIFT PLANS

3-Year Pledge	Annual	Quarterly	Monthly
<input type="radio"/> \$6,000	\$2,000	\$500	\$167
<input type="radio"/> \$4,500	\$1,500	\$375	\$125
<input type="radio"/> \$3,000	\$1,000	\$250	\$83
<input type="radio"/> \$1,500	\$500	\$125	\$42
<input type="radio"/> Other \$ _____ per month for _____ months beginning in _____ (month) of _____ (year).			

TOTAL GIFT \$

PAYMENT ENCLOSED \$

BALANCE DUE \$

Please send me reminders:

Annually  Quarterly  Monthly

### METHOD OF PAYMENT

- Cash/Check  
*Please make checks payable to The Advancement Foundation and indicate **Faith, Formation, Future** in the memo.*
- Credit Card/Debit Card/Automatic Bank Withdrawal  
*We will mail you information to complete your payment plan.*
- Mutual Funds/Stocks/Life Insurance  
*We will contact you by phone with more information on how to complete your gift.*
- My company/employer will match my campaign gift.

\_\_\_\_\_  
Company name

### DONOR INFORMATION

Last Name \_\_\_\_\_

First Name \_\_\_\_\_

Spouse Name (if applicable) \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Cell Phone \_\_\_\_\_

Home Phone \_\_\_\_\_

Email \_\_\_\_\_

Please print your name as you would like it to appear when **recognized as a campaign donor**

I/We would prefer our gift to remain anonymous



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