

**ST. IGNATIUS OF ANTIOCH CHURCH
Expansion Project Pledge Form**

PLEASE PRINT

Office Use Only		
R <input type="checkbox"/>	A <input type="checkbox"/>	O <input type="checkbox"/>

Name : _____

Address _____ City _____ ZIP _____

Daytime Phone: (____) _____ - _____ Email Address (optional): _____

I (we) are able to make a financial pledge to this Project.

Signature: _____ Date: _____

My (our) gift is a (check one)

ONE-TIME GIFT - \$ _____ Date Gift to be made: _____

OR

PLEDGE - I (we) wish to make a pledge payable monthly:

Pledge Period: 36 Months or 24 Months or 12 Months

Monthly Payment: \$ _____ My Total Gift: \$ _____

Payment Method:

Personal Check or EFT or Credit Card

EFT or Credit Card: Please complete additional information on the reverse.

SUGGESTED WAYS TO MANAGE YOUR PLEDGE

Total Gift Amount	Monthly Gift for a 36 Month Pledge	Monthly Gift for a 24 Month Pledge	Monthly Gift for a 12 Month Pledge
\$10,000	\$278	\$417	\$833
\$5,000	\$139	\$208	\$417
\$4,000	\$111	\$167	\$333
\$3,000	\$83	\$125	\$250
\$2,500	\$69	\$104	\$208
\$2,000	\$56	\$83	\$167
\$1,500	\$42	\$63	\$125
\$1,000	\$28	\$42	\$83

3351 Contra Loma Blvd., Antioch, CA 94509 925.778.0768

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Pledge Payment Information for EFT or Credit Card

Complete this section if you wish to make Expansion Project pledge payments via EFT

Make the transfer from my: Checking Account: Attach a voided check.

Savings Account: Attach a deposit slip.

Make the transfer on the: 1st Wednesday of the month.

3rd Wednesday of the month.

I authorize St. Ignatius of Antioch Church, Antioch to process entries from my checking account or savings account as noted above. This authority will remain in effect until my pledge obligation is complete or I give reasonable notification to terminate this authorization.

SIGNATURE: _____ DATE: _____

Complete this section if you wish to make Expansion Project pledge payments via Credit Card

Credit Card Number: _____

Expiration Date (MM/YYYY): ____ / ____ Billing Address Zip Code: _____

Card Security Code: _____ (3 or 4 digit number located on the back of the card)

Charge my credit card on the: 1st Wednesday of the month.

3rd Wednesday of the month.

I authorize St. Ignatius of Antioch Church, Antioch to process charges on my credit card as noted above. This authority will remain in effect until my pledge obligation is complete or I give reasonable notification to terminate this authorization.

SIGNATURE: _____ DATE: _____