



I/We pledge to the **Honoring Our Past... Preserving Our Future** Capital Campaign:

Total Pledge/Gift Amount: \$ _____

Payment Enclosed: \$ _____

*Please make checks payable to: OLL - SA Capital Campaign
Campaign donations are tax-deductible contributions.*



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I/We will make my/our pledge payments:

Monthly Quarterly Bi-Annually Annually
(See reverse side of card for method of payment options and gift comments.)

I/We would like to make my/our first pledge payment on:

_____/_____
Month Year

Signature: _____

Date: _____

Email: _____

Phone Number: _____

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PAYMENT OPTIONS

- Cash/Check (Please make checks payable to: OLL – SA Capital Campaign)
- Automatic Withdrawal from Checking/Savings Account*
- Stock or Mutual Fund**
- Life Insurance**
- Estate Gift**
- Other: _____
- My company will match my gifts to the campaign
Company Name: _____

*Our Lady of Lourdes – St. Adalbert Parish will mail an authorization for you to complete and return.

**Our Lady of Lourdes – St. Adalbert Parish will contact you to make arrangements.

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DONOR INFORMATION

- I/We would like my/our gift to remain anonymous.
Donor Comments of Gift Details: _____

Please print your name(s) as you would like it to appear in any campaign recognition materials: _____

Name of Campaign Volunteer: _____

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