

ST. PIUS X CAPITAL CAMPAIGN - "RENEW AND REFRESH 2020"

Suggested 3 Year Giving Plan

TOTAL GIFT	Monthly	Quarterly	Annually
	12	4	1
	Payments/Year	Payments/Year	Payment/Year
\$10,000	\$277.78	\$833.33	\$3,333.33
\$ 7,500	\$208.33	\$625.00	\$2,500.00
\$ 5,000	\$138.89	\$416.67	\$1,666.67
\$ 2,500	\$69.44	\$208.33	\$833.33
\$ 1,000	\$27.78	\$83.33	\$333.33
\$ 500	\$13.89	\$41.67	\$166.67

Name:	Email address:		
Address:	Phone No.:		
City:			
State:Zip C	ode:		
Signature:	Date:		
Pledge/Gift Total: \$ Amou	nt Enclosed: \$	Balance: \$	
Method of Payment:Check #Cr	edit CardOther		
*Please make checks payable to: St. Pius X Churc	h. Capital Campaign conclu	des as of December, 2020)
BANK AUTHORIZATION			
I wish to charge monthly payments of \$	for a total of \$	*Starting month:	
Bank Account #	Routing #		
Please make this electronic transfer on the (check one	e): 5 th of the month	_ 20 th of the month.	
(Please enclose voided check for authorization)			
Signature:			
Daytime Phone:			
CREDIT CARD AUTHORIZA	<u>ATION</u>		
AMEXVisa MasterCard	Other		
Credit Card No.		3 Digit Verification Code on back of card If AMEX, 4 digit code on the front of card	
Exp. Date(Mo.)(Yr.)	II AMLA, 4	digit code on the front of c	aru
I wish to charge monthly payments of \$	for a total of \$_	*Starting 1	month:
Add 3% to help cover the costs of processing? Circle	e one: Y/N		
Print Name (as it appears on the card):	Cardholder Sig	gnature:	
Billing Address, if different from above: Street:			_
City, State	and Zip:		