

SAINT MARY IMMACULATE CONCEPTION  
INTERIOR RENOVATION PLEDGE CARD

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*What we are asking you to do to help us complete our Campaign...*

1. Please read over the campaign materials and prayerfully consider a sacrificial gift to the best of your ability.
2. Please consider making your gift in honor or memory of a loved one and having their name added to the Sanctuary Supporters Donor Wall (see additional sheet in campaign materials).
3. Please mail the completed pledge form, or drop it in the Sunday collection, or bring it to the Parish Office on or before December 8th, 2017 (the Feast of the Immaculate Conception). If we receive your response by that date, you will not receive a follow-up contact. If you prefer, a volunteer will contact you after "Commitment Weekend" and you can discuss the Campaign with them.

**Thank you again for your generosity in the renewal of our worship space that stands at the center of our community.**

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ *Please call me with questions regarding my pledge*

**24- Month Total Pledge Amount:**

\$25,000    \$15,000    \$10,000    \$5,000    \$2,500    \$1,000    \$500    Other: \$ \_\_\_\_\_

\$ \_\_\_\_\_ **Down Payment Amount Enclosed** *Please check here if total pledge payment is enclosed.*

\$ \_\_\_\_\_ **Remaining Amount**   I will pay the remaining amount monthly over the next  
 6 months    12 months    18 months    24 months   *(please check one)*

**Payment Options:**

Check # \_\_\_\_\_

Please make checks payable to: "Saint Mary Immaculate Conception" (Memo: Interior Renovation Campaign)

Cash

Credit Card – I will visit [www.stmaryparishwb.org](http://www.stmaryparishwb.org) to pay via WeShare

EFT – Please use electronic funds transfer from my bank account  
(Please included a voided check).

*For Monthly EFT Payments, please check one:*

1st of the Month    15th of the Month

Saint Mary Immaculate Conception may list my name in written materials when giving thanks to donors.    Yes    No

Donations are tax-deductible as allowed by law.

*For Parish Office Use Only:*

Date Received \_\_\_\_\_

Date in ACS \_\_\_\_\_

by \_\_\_\_\_

TY \_\_\_\_\_