

"A Future Full of Hope" Campaign.

Note: The campaign pledge period is preferably three years. Within that period, you have the flexibility of deciding how you would like to schedule your pledge payments. If you are able to make a down payment, it will very much help to be able to have cash in-hand before beginning construction.

GIFT PLEDGE FORM

Gift/Pledge Amount

To assist St. Joseph's Parish, I/we make a good-faith commitment in the amount of \$ _____, in dollars and /or the following assets or gifts in-kind to be paid over ___ years.

Special Instructions:

Payment Method

It is my/our intent to fulfill this gift/pledge through the following installments:

\$ _____ down payment to be paid on (date) _____

The balance to be paid in equal amounts of _____, beginning (date) _____

- Annually Semi-annually Quarterly
- Monthly Other _____

- Payment Methods:
- Bill me (Please make checks payable to St. Joseph's Parish)
 - Checking or Savings EFT (see reverse for instructions)
 - Secure online payments (pay by credit card or Paypal account)
- www.stjoesmhd.com

My employer offers matching gifts. Employer name: _____

Confirmation and Reminders

I/we understand that St. Joseph's Parish will send out periodic reminder notices.

Signature(s) _____ Date _____

Print Name Clearly _____

Address _____ Phone _____

Return to: Matthew Devick, Stewardship/Communications Coordinator
218 10th St. S., Moorhead, MN 56560
(218) 284-6228 mdevick@stjoesmhd.com

May God bless you for your generous support! Please keep us in your prayers.

Please respond as soon as possible.

Electronic Funds Transfers

We would like to help make the gift process more convenient and efficient for those giving to St. Joseph's Parish by offering you the opportunity to give electronically through your account.

This method can benefit you by saving on postage, and also reduces the paperwork and administrative time needed. It saves you time since it doesn't require you to write a check. The transfer method simply deducts your indicated amount from your account. The automatic deduction will appear on your monthly bank statement.

If you would like to use the electronic method, please fill out the form below and return it to us with a voided check. We will then deduct the amount you indicate on the day of the month (1st or 15th or both) that you indicate until your pledge is completed. The financial institution where you bank makes no difference whatsoever—any bank is acceptable.

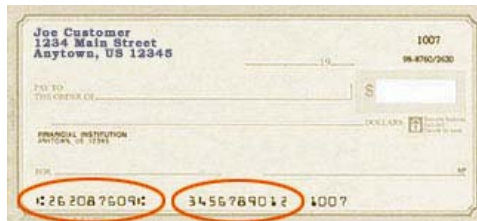
Besides receiving your monthly statement from your bank with the deduction shown, we will send out annual statements that can be used for your tax purposes. If you have any questions, please call me at (218) 284-6228.

Your Brother in Christ,

Matthew Devick
Stewardship/Communications Coordinator

AUTHORIZATION AGREEMENT FOR DIRECT PAYMENTS (ACH DEBITS)

I (we) hereby authorize St. Joseph's Catholic Church to initiate debit entries on the (select one) first of the month fifteenth of the month first AND fifteenth of the month to my (our) Checking account / Savings account (please select one) indicated below at the depository financial institution named below and to debit to the same account. I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of U.S. law.



Bank Name _____

Branch _____

City _____ State _____

Zip _____

Routing Number _____ Account Number _____

(see illustration above for how to find your routing and account numbers)

Please deduct a total of \$ _____ monthly (if you choose first AND fifteenth, half of this amount will be deducted on these days)

Month of first deduction: _____

This authorization is to remain in full effect until St. Joseph's Catholic Church has received written notification from me (or either of us) of its termination in such a time and in such a manner as to afford St. Joseph's and my bank a reasonable opportunity to act on it.

Name(s) (please print) _____

Signature _____ Date _____ Signature _____

Date _____

(any other instructions) _____