



Fulfilling the Mission

COMMITMENT CARD

Name _____

Address _____

City _____ ST _____ Zip _____

Email _____

Best phone _____

After prayerful consideration and in faith, I/we commit to give to the CCASTA Fulfilling the Mission initiative the following sacrificial gift to be completed by:

Date _____ **Amt \$** _____

My/our commitment is above our regular offering to the parish and will be paid with the following frequency:

Weekly \$ _____

Monthly \$ _____

Annually \$ _____

Other _____ \$ _____

I would like to give a non-cash gift

Description of non-cash gift _____

Approximate value of gift \$ _____

I would like more information on planned estate giving

Enclosed is an initial gift for \$ _____