

Please make checks payable to:
**CATHEDRAL OF
 OUR LADY OF LOURDES**

Name _____

Address _____

City, State, Zip _____

My/our gift to the campaign is:

Total Pledge: _____

Down Payment: _____

Balance Due: _____

Gifts are tax deductible as allowed by law

RESPONSE REPORT

If no gift is made, please indicate one of the following:

- Moved or moving soon
- Not at home. Called _____ times
- Not a member of our Church
- Serious illness
- Deceased
- Cannot afford to pledge at this time
- Does not support this endeavor
- Please re-contact in _____ months
- Will turn in pledge cards soon.
- Other: _____

I/we prefer to pay the balance as follows:

- Monthly
- Quarterly
- Annually

Over a period of:

- 3 years
- 2 years
- 1 year
- Other _____

Beginning: _____
 (mm)/(dd)/(yyyy)

If giving by credit card, please provide information on the back of this card.

Signature _____



Please contact me with information on the following:

- Gifts of Stock
- Gifts of Annuities
- Gifts of Property
- Matching Gifts
- Remembering the parish in your will
- Other: _____

For Office Use Only

- Credit/Debit Card
- Cash
- Check

Date	Payment	Auditor

AUTHORIZATION FOR CREDIT CARD Visa Mastercard Amex

Name as it appears on card: _____

Credit Card No: _____

Expiration: _____ Verification (CSV)#: _____

AUTHORIZATION FOR BANK DRAFT (EFT): *Please attach a voided check.*

Bank / Financial Institution: _____

Name as it appears on account: _____

Bank Routing Number: _____

Checking Account Number: _____

Your signature on the front of this card authorizes automatic withdrawal payments.