ST. BERNARD CATHOLIC CHURCH/CAPITAL CAMPAIGN 2025

LETTER OF INTENT

About you:

Name:_____

Address:_____

City/State/Zip_____

Phone:_____

Email address:_____

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I wish to make a contribution to St. Bernard Capital Campaign as follows:

Total Gift or Pledge:_____

Payment Enclosed:_____

Balance to be paid over_____years (maximum is 3)

Payments on my pledge will begin ___/___/_____

Payments on my pledge will be made:

_____Monthly

_____Quarterly

_____Annually

_____Lump Sum

_____Amount of each payment

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Sample of Payments:

Gift - $50,000 – 36 monthly payments of $1,389.00

Gift - $25,000 – 36 monthly payments of $694.00

Gift - $10,000 – 36 monthly payments of $278.00

Gift - $5,000 – 36 monthly payments of $139.00

Gift - $2,000 – 36 monthly payments of $56.00

Gift - $1,000 – 36 monthly payments of $28.00

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Acknowledgements:

_____I wish to remain anonymous

_____I wish the name/names to be listed as follows

_____

_____

_____

_____Our gift is in honor or memory of:

_____

_____

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Signature:_____

Dated:_____