



Advancement Office
320 Middlefield Road
Menlo Park, CA 94025
Tax ID#94-1156604

Total Pledge Amount: \$ _____ Length of Pledge: _____ year(s)

Payment Schedule—I/we will make:

- Monthly payments of \$ _____ every month starting _____ (date).
- Quarterly payment of \$ _____ every three months starting _____ (date).
- Annual payments of \$ _____ every year starting _____ (date).
- A single payment of \$ _____ on _____ (date).

- Enclosed is my/our first payment of \$ _____ (if applicable).
- Please send pledge reminders to the address I/we provided below.

Method of Payment:

- Check—Payable to St. Patrick's Seminary 320 Middlefield Rd Menlo Park CA 94025.
- Credit Card Online—Make a secure online donation at www.stpsu.edu/giving/
- Stock/Securities—Contact Martha Sheridan martha.sheridan@stpsu.edu / (650) 289-3355

Company Match (if eligible):

Company Name: _____

My match request form: is enclosed is on the way will be submitted online

- Please consider my total expected match of \$ _____ as part of my pledge.
Knowing the expected match amount lets us accurately record pledges per IRS rules and STPSU practices.

Donor Name(s): _____

Donor Recognition Listing: _____ or Anonymous.

Special instructions or designation of gift (optional): _____

Street Address / City / State: _____

Phone: _____ Email: _____

- Home Business Mobile Please send my receipt electronically, if possible.

Signature(s): _____ Date: _____

_____ Date: _____