



Advancement Office Pledge Form

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

Designation(s): _____

Payment Schedule – I/we will make:

- Monthly payments of \$ _____ every month starting on _____ (date).
 - Quarterly payment of \$ _____ every three months beginning on _____ (date).
 - Annual payments of \$ _____ every year starting on _____ (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** – Make it payable to **St. Patrick's Seminary** and send it to the above address.
- Credit Card Online** – Make a secure online donation via Visa, MasterCard, American Express, or Discover securely online at www.stpsu.edu/giving
- Stock/Securities** – Find transfer instructions at www.stpsu.edu/giving

Company Match (if applicable):

- My gift is eligible for a company match. 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 the IRS rules and STPSU practices.

Donor Name(s): _____

Donor Recognition Listing: _____ *or* Anonymous

Special Instructions (optional): _____

Address: _____

City _____ State _____

Phone: _____ Email: _____

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

Signature(s): _____ Date: _____