



# DONOR/PLEDGE FORM

Please Consider Helping with This Immediate Challenge

Donor name(s) \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Phone(s) \_\_\_\_\_

Email \_\_\_\_\_

I would prefer that this contribution and/or my name be kept confidential. Thanks!

By signing below, I/we are committing to the following pledge/donation to the St. Maron Emergency Repair Project

## DONATIONS

### A ONE-TIME DONATION IN THE AMOUNT OF:

\$10,000  \$7500  \$5,000  \$2,500  \$1,000

\$500  \$250  \$100 OTHER \_\_\_\_\_

### A REPEATING DONATION AS FOLLOWS:

A sum of \$ \_\_\_\_\_ once every  Month  Quarter  Year, amounting to a total of \$ \_\_\_\_\_

## METHOD OF PAYMENT

Check enclosed. Please make checks payable to: **St. Maron Emergency Repair**

Please bill my credit card: **Card type:**  Visa  Mastercard  American Express  Discover

Account number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Securities, stocks or other forms of payment: Please call the Parish office at 330-792-2371

## CONFIRMATION

Signature \_\_\_\_\_ Date \_\_\_\_\_