THE GESU CENTURY

One Faith • One Family • One Future

LETTER OF INTENT

Name:_____Date:_____

Address:_____

City:_____State:_____Zip:_____

Phone:_____Email:_____

GESU CENTURY MAJOR GIFT

Total $_____. I/We will make payments over a period of_____years, beginning_____.

This commitment will be paid as follows:

❑ Annually in_____
(month)

❑ Semi-Annually in_____and_____
(month) (month)

❑ Quarterly in _____, _____, _____, _____
(list months)

❑ I have enclosed a check.

❑ I would like to pay by credit card.

❑ My gift is unrestricted.

My gift is restricted to:

- ❑ Infrastructure and Preservation
- ❑ New Outdoor Campus
- ❑ Endowment

Please list my/our names as follows: (this will be for publications and donor plaque)

_____

GESU CENTURY PLANNED GIFT

❑ I have made provisions in my estate plans for Gesu Catholic Church and School.

Other instructions: _____

_____

❑ Please contact me regarding my gift.

CREDIT CARD FORM

❑ Visa ❑ MasterCard ❑ Discover ❑ American Express

Name on Card:_____Zip Code:_____

Credit Card #:_____3-Digit CID:_____Exp. Date:_____

DIRECT DEBIT FORM

Checking Account #:_____Bank Routing #:_____

Bank Name:_____Date:_____

❑ Please deduct $_____ monthly using the account information provided.

SIGNATURE:_____