



Name(s): _____
Address: _____
City: _____
State ZIP: _____
Phone: _____
Email: _____

- ☐ Company Match
☐ I/We prefer to remain anonymous

Total Amount Pledged: _____

Total Down Payment: _____

Balance Remaining: _____

Please select one of the following payment schedules.

- ☐ **Monthly Pledge** (Monthly for 36 months)
☐ **Quarterly Pledge** (12 Quarters)
☐ **Annual Pledge** (3 Years)
☐ Other _____

Please select one of the following payment methods:

- ☐ Check (make checks payable to St. Joseph Parish, add memo: School Remodel)

- ☐ Electronic Funds Transfer (EFT)

Name on Bank Account _____

Bank Name _____

Routing # _____

Account # _____

Giving Plans to Consider		
Total Pledge	50% Down Payment	Monthly (36)
\$100,000	\$50,000	\$1,389
\$50,000	\$25,000	\$695
\$25,000	\$12,500	\$347
\$20,000	\$10,000	\$277
\$15,000	\$7,500	\$208
\$10,000	\$5,000	\$138
\$7,500	\$3,750	\$104
\$5,000	\$2,500	\$70
\$4,000	\$2,000	\$55
\$3,000	\$1,500	\$42

For questions and comments, contact Ron Murphy, Finance Council Chairperson at 651-246-9506 or schoolremodel@stjosephprescott.com

- ☐ I authorize the Diocese of La Crosse or St. Joseph Parish to automatically withdraw from my checking account on the 15th of every month. Donations will continue through the 36 month period.
- ☐ Please process my down payment.
- ☐ Please process my remaining monthly, quarterly or annual pledge amount.
- ☐ For Electronic Funds Transfer from a checking account, **please enclose a voided check.**

Signature: _____ Date: _____

By signing, I authorize the Diocese of La Crosse or St. Joseph Parish to debit my account as listed above.

Thank you for your generous commitment to the future of our school. Your support makes this vision possible.



St. Joseph Parish Office
269 Dakota Street S. | Prescott, WI 54021
715-262-5310 | stjosephprescott.com

Donate online at stjosephprescott.com/founded-in-faith