Queen of the Apostles Catholic Church

Building a Home for All Campaign

FFHL—Phase II

100% of all pledge dollars are restricted to QoA Building Campaign

Name *(please print)* _____

Street _____

City/State_____ **Zip code**_____ **Telephone**_____

My total 3-year pledge is $_____

Payment Method: Please select one of the following:

Check: _____ **Credit Card:** _____ **EFT:** _____

I will pay: Monthly _____ Quarterly _____ Semi-Annually _____ Annually _____

Amount per payment period: $_____ First Payment Start Date _____

I authorize Queen of the Apostles Church to execute my pledge fulfilment.

Signature _____**Date**_____

Electronic Funds Transfer (EFT) Authorization

You may electronically transfer $_____per month for _____months to fulfill a pledge of $_____.

PLEASE CHECK ONE BOX:

☐ I am already enrolled in the diocesan EFT and wish to continue. *My account information has not changed.*

☐ Checking Account **(must enclose a voided check)** or

☐ Savings Account **(must enclose a savings deposit slip and a voided check)**

Print Name: _____ Daytime

Phone: _____ Email

Address: _____

_____

Signature **Date**

Credit Card Authorization

Please complete the following for gifts by credit card:

Print Name of Cardholder:_____ Billing

Zip Code: _____ Daytime

Phone: _____

Email Address: _____

_____

Cardholder's Signature Date

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☐ Visa ☐ Master Card Exp. Date: ☐☐\☐☐

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