

# St. Augustine Cathedral Parish Capital Campaign Pledge Form

Name (Mr./Mrs.) \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell \_\_\_\_\_ Office \_\_\_\_\_

Email \_\_\_\_\_

Amount of donation: \$ \_\_\_\_\_

Credit Card Information: \_\_\_\_\_MC \_\_\_\_\_Visa \_\_\_\_\_AmEx \_\_\_\_\_Discover

Credit Card Number: \_\_\_\_\_ Exp. Date: \_\_\_\_\_ CVC Code: \_\_\_\_\_

Authorized Signature: \_\_\_\_\_

Please make checks payable to **St. Augustine Cathedral Parish**

\* Donations to the non-profit St. Augustine Cathedral Parish are tax-deductible to the extent allowed by current law and your own tax circumstances.