

(APOSTOLATE NAME) PLEDGE CARD

Name(s): _____
Prefix First Last

Mailing Address: _____
Address City State Zip

Telephone: _____ Email: _____
Area Code Number Address

I PLEDGE:	<input type="checkbox"/> \$1,000	<input type="checkbox"/> \$500	<input type="checkbox"/> \$250	<input type="checkbox"/> \$100
	<input type="checkbox"/> \$83.50	<input type="checkbox"/> \$75	<input type="checkbox"/> \$50	Other \$ _____
As follows:	<input type="checkbox"/> Each Month (for 24 Months)		<input type="checkbox"/> One Time Only	

Signature: _____ Date: _____

_____ (Apostolate Name) is a 501(c)(3) non-profit corporation - All donations are tax deductible

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