

SAINT MARY MAGDALEN
PARISH FAMILY



from WITNESSING to PROCLAIMING
1956 - 2006

Yes, I wish to support St. Mary Magdalen Church's Capital Campaign.

Accordingly I commit \$ _____
to this project. My commitment will
be paid as follows:

- | | |
|------------------------------------|-----------------------------------|
| <input type="checkbox"/> Lump Sum | <input type="checkbox"/> Monthly |
| <input type="checkbox"/> Quarterly | <input type="checkbox"/> Annually |

You may electronically transfer \$_____ per
month for _____ months, to fulfill my pledge
balance of \$_____.

Please make this EFT transfer on the 10th of
each month from my (check one):

- checking account (must enclose a void check)
- savings account (must enclose a deposit slip)

Your signature is required for billing as
well as checking debit processing. St. Mary
Magdalen cannot process your automatic
checking debit payments without your signa-
ture. All information provided is confidential.

* see back of card for special gift opportunities

NAME _____

ADDRESS _____

CITY, STATE, ZIP _____

PHONE _____

SIGNATURE _____

DATE _____

**I wish to support
Saint Mary Magdalen Church's
Capital Campaign with a
Commemorative Gift or
a Special Gift.**

This is a Commemorative Gift:

In Memory of: _____

In Honor of: _____

Special Gift Opportunities

Lower Stained Glass (Penitent Doors)	\$2,500
Upper Stained Glass (Windows)	11,500
Front Entry	22,000
Chapel	54,000
Chapel Window	5,000

Other Opportunities Available!