

Please select **ONE** payment option, and **ONE** payable option below:

I/We wish to support the *Saint Joachim Rectory* Campaign as follows:

**Your gift is tax deductible as legally allowed.**

- Online Giving** at [www.catholicfsm.org/StJoachim](http://www.catholicfsm.org/StJoachim)
- Check Enclosed** Make payable to: Catholic Foundation of Southern Minnesota (CFSM)
- Credit Card** (See reverse side)
- Automatic withdrawal from Checking Account** please attach a voided check

Payable:  **One Time Gift**       **Monthly**       **Annually**  
 **Other** \_\_\_\_\_

Donor Signature \_\_\_\_\_ Date \_\_\_\_\_

Env. # \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

One Gift/Pledge	Annual (3 payments)	Monthly (36 payments)
\$1,000	\$334	\$28
\$750	\$250	\$21
\$500	\$167	\$14
\$400	\$134	\$12
\$250	\$84	\$7

*Monthly: beginning on the 10th of the month received*

**Total Gift/Pledge**      \$ \_\_\_\_\_

**Initial Payment**      \$ \_\_\_\_\_

**Balance Due**      \$ \_\_\_\_\_

This gift is made in  Honor of  Memory of:

(Name)

(Address)

Credit Card *(debit cards with Mastercard or Visa logo accepted)*

Please charge my **Saint Joachim Rectory Campaign** donation of \$ \_\_\_\_\_ to my:

**Visa**     **Mastercard**     **American Express**     **Discover**

Account # \_\_\_\_\_ Exp. Date \_\_\_\_ / \_\_\_\_

Cardholder Name \_\_\_\_\_

- Please charge my credit card one time for the full amount of my pledge.
- Please charge my credit card \$ \_\_\_\_\_ per month until my pledge is paid in full.
- Please charge my credit card \$ \_\_\_\_\_ annually until my pledge is paid in full.

*ACH and Credit Card withdrawals are made on the 10th of the month*

Donor Signature \_\_\_\_\_ Date \_\_\_\_\_

If you would like to contact the CFMS with your credit card or checking account information,  
**please contact Amie at 507.858.1275**



**SAINT JOACHIM**  
**RECTORY CAMPAIGN**  
PLAINVIEW, MINNESOTA



**CATHOLIC**  
**FOUNDATION**  
of Southern Minnesota

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