

Saint Thomas More Parish

2019 PLEDGE FORM

COMMITMENT WEEKEND
Nov. 17th & 18th

Name(s): _____
 Address: _____
 City, State, Zip: _____ Envelope #: _____
 Phone #1: _____ Phone #2: _____
 Email #1: _____
 Email #2: _____



STEWARDSHIP

Annual Stewardship (5% of gross income)

Thank you for doing what you can to support our STM community. Please return your 2019 pledge form, regardless of your pledge amount, to help us keep our database current.

2019 Pledge

I/we would like to increase my/our annual pledge/gift by: 3% 6% 9% (2018 pledge \$ _____)

I/we would like to keep my/our annual pledge/gift the same.


\$ _____ Weekly/52 weeks \$ _____ Monthly/12 months \$ _____ Quarterly/4 quarters \$ _____ Annually

\$ _____ **Total 2019 Gift** (See payment options below)

Check one:

I/we plan to pay by check.
 I/we prefer to use automatic bank withdrawal (See reverse side)
 I/we wish to pay by credit/debit card (Visa, Mastercard, AmEx, Discover) (See reverse side)
 Contact me/us about a gift of IRA, stock, bond or other asset with an approximate value of \$ _____

For more information or to pledge online, visit stmkc.com/as.



CAPITAL CAMPAIGN

Capital Campaign 2019-2020 (3% of gross income each year for 2 years)

_____ I/We made a 3-year Capital Campaign pledge. Thank you!

If you have made a Capital Campaign pledge, please jump to the next box. If you have not, please consider making a pledge below.

I/We would like to contribute for the next two years:


\$ _____ Weekly/104 weeks \$ _____ Monthly/24 months \$ _____ Quarterly/8 quarters

\$ _____ Annually/2 years \$ _____ One-time gift \$ _____ **Total Gift** (See payment options below)

Check one:

I/We plan to pay by check.
 I/We prefer to use automatic bank withdrawal (see reverse side)
 I/We wish to pay by credit card (Visa, Mastercard, AmEx, Discover) (see reverse side)
 Contact me/us about a gift of IRA, stock, bond or other asset with an approximate value of \$ _____

For more information or to pledge online, visit stmkc.com/as.



ACA

Diocesan Annual Catholic Appeal (1% of gross income)

Please see enclosed diocesan envelope or visit kcsjatholic.org to pledge online.

Please drop the diocesan envelope in the mail to the diocese or return it to STM along with your STM envelope.

TIME & TALENT

Time & Talent — See enclosed flyer for ministry descriptions

I would like to help with a ministry currently in need (please indicate by individual name):

- | | |
|---|--|
| _____ Ambassador (Information Table) | _____ High School CORE Team |
| _____ Care Ministry | _____ Hospitality Minister (Usher) |
| _____ Catechesis of the Good Shepherd | _____ Middle School CORE Team |
| _____ Children's Liturgy of the Word | _____ Neighborhood Captain |
| _____ Coffee & Donuts Host | _____ RCIA Team Member |
| _____ Eucharist Minister | _____ School of Religion/Rite of Christian |
| <input type="checkbox"/> at STM Masses | Initiation for Children |
| <input type="checkbox"/> to Homebound | _____ Other: _____ |
| <input type="checkbox"/> at Nursing Homes | _____ Other: _____ |
| _____ Faith in Action Team Member | _____ Other: _____ |

ADDITIONAL GIVING

Additional Giving

- I/we plan to include Saint Thomas More as part of my/our Estate Plan
- I/We have checked with employer(s) regarding a matching gift.
- Employer #1 _____ Occupation #1 _____
- Employer #2 _____ Occupation #2 _____

CARD INFORMATION

Annual Stewardship / Capital Campaign

- Annual Stewardship Capital Campaign Call Me for Parish Staff to Set Up



Direct Payment Options

- I/we use online giving and will update my/our information. (Pledge is still requested!)

Automated Check Withdrawal information

Print name(s) _____

Routing # _____ Account # _____ (or voided check)

Checking account Savings account Name of Bank _____

Credit Card Debit Card

Card Information

Visa Master Card American Express Discover

Card Number _____ Security Code _____ Expiration Date _____

Name on Card _____ Zip Code _____

Signature _____

