

ST. ELIZABETH SETON BUILDING FUND
“LIVING OUR FAITH, BUILDING OUR COMMUNITY”

NAME: _____

ADDRESS: _____

PHONE #: _____

ENVELOPE #: _____

Please make checks payable to:
 St. Elizabeth Seton Building Fund

FOR OFFICE USE ONLY:

Cash:

Check#

Date	Payment	Auditor

My/Our gift to the Campaign is:

TOTAL PLEDGE: \$ _____

DOWN PAYMENT: \$ _____

BALANCE DUE: = \$ _____

I/we prefer to pay the balance as follows:

Monthly Quarterly

Semi-annually Annually

Over a period of:

1 year 2 years 3 years

Signature: _____