

Please check one: Mr. and Mrs. Mr. Mrs. Ms.

PLEASE PRINT BELOW:

First name Spouse name Last name

Address City State Zip

Phone Email

Please credit my gift to (Parish Name and City)

I do not wish to contribute at this time I have already contributed

I wish to pay by credit card: Visa MasterCard Discover

Credit Card Number Exp. Date _____

Print name as it appears on card Signature

Please remit to: Disciples Response Fund Appeal, McRaith Catholic Center, 600 Locust Street, Owensboro, KY 42301

Diocese of Owensboro ● Disciples Response Fund
2018-2019 ANNUAL APPEAL

Suggested Pledge

10 Monthly Payments

St. Stephen Society

- \$1,250.00..... \$125.00
- \$1,000.00..... \$100.00

Circle of Compassion

- \$750.00..... \$75.00

Circle of Mercy

- \$500.00..... \$50.00

Circle of Grace

- \$400.00..... \$40.00
- \$250.00..... \$25.00

Other Gifts

- \$150.00..... \$15.00
- \$125.00..... \$12.50
- Other..... \$_____

Total Amount Pledged
\$ _____

Amount Enclosed
\$ _____

Balance to be Paid
\$ _____

Payment Terms
 One Time Pledge
 10 Monthly Payments