

PLEDGE FORM

First Name (please include preferred salutation) _____ MI _____

Last Name _____

Home Address _____

City _____ State _____ Zip Code _____

Preferred Email _____ Date of Birth (MM/DD/YY) _____

Home Phone _____ Mobile Phone _____

Please print your name as you wish to be recognized _____

I would like to be recognized with my spouse/partner Spouse/Partner Name _____

Please print your names as you wish to be recognized _____

YOUR GIFT

I/we wish to pledge the sum of \$ _____, payable beginning _____.

Designation of Gift _____ Naming Opportunity _____

Payments will be made annually semi-annually quarterly monthly through installments of \$ _____

Cash/Check Credit Card American Express Discover MasterCard Visa

Other _____

Credit Card Number _____ Expiration Date _____ Security Code _____

ST. LUKE'S EMPLOYEES ONLY (see back of page for schedule)

payroll deduction through installments of \$ _____ per pay, beginning _____ for _____ pay periods.

Employee Number _____

TRIBUTE (If this is a memorial or named gift, please indicate)

Memorial or Honor given by _____

In Honor of In Memory of Please print his/her name below *exactly* as you wish for it to appear in the official record.

Name _____

Additional Instructions _____

SIGN AND DATE

Donor Signature _____ Date _____

Development Officer _____ Date _____

ST. LUKE'S EMPLOYEES ONLY

PAYROLL DEDUCTION CALCULATOR

Bi-Weekly Deduction	Gift Per Year	3Yr 78 Pays Total Gift	4Yr 104 Pays Total Gift	5Yr 130 Pays Total Gift
\$10.00	\$260	\$780	\$1,040	\$1,300
\$25.00	\$650	\$1,950	\$2,600	\$3,250
\$50.00	\$1,300	\$3,900	\$5,200	\$6,500
\$75.00	\$1,950	\$5,850	\$7,800	\$9,750
\$100.00	\$2,600	\$7,800	\$10,400	\$13,000
\$115.00	\$2,990	\$8,970	\$11,960	\$14,950
\$195.00	\$5,070	\$15,210	\$20,280	\$25,350

THANK YOU