



St. Michael Catholic Church

05480 Moser Rd

Defiance, Ohio 43512

Phone: 419 497 2161 (Fax: 419 497 2058)

New Parish Center Pledge Form

In support of the St Michael's Ridge Parish Center, I/we hereby pledge a total gift of \$\_\_\_\_\_.

I/We wish to make payments as follows (Diocese requires all pledges to be collected in a 3 year time frame):

Total Pledge:

- Monthly, Quarterly, Semiannual, Annually payment options with formulas for total pledge.

Beginning \_\_\_\_\_, (\_\_\_\_\_)
Month Year

- Make checks payable to: St. Michael Catholic Church (put in memo "Parish Center Fund")
Pledges may be mailed/given to Fr. Jacob Gordon, Kent Beilharz, or dropped in the weekly collection

I/We would like to include our first payment with this pledge form.

I authorize St. Michael's Parish to withdrawal my pledge at the frequency indicated above via Automatic Banking Deduction (Please complete reverse side of document to verify automatic deduction approval)

Signed \_\_\_\_\_ Date: \_\_\_\_\_

Printed: \_\_\_\_\_

Signed \_\_\_\_\_ Date: \_\_\_\_\_

Printed: \_\_\_\_\_

Thank you for supporting the St. Michael's The Ridge Parish Center Campaign. Your donation will continue to provide Faith in Our Future. God Bless!



## Automatic Deduction Request

To: St. Michael's The Ridge Catholic Church Parish Center Fund

I would like to use the automatic deduction method of giving to the Parish Center Fund. I understand this agreement will allow St. Michael's The Ridge to secure the following amount for the indicated time frame from my checking/savings account:

Type of account: \_\_\_\_\_  
(checking/savings)

Bank Acct No. \_\_\_\_\_

Routing No. \_\_\_\_\_

Please deduct \$ \_\_\_\_\_ monthly (on or about the 1<sup>st</sup> of the month)  
(amount)

Beginning \_\_\_\_\_ and ending \_\_\_\_\_ .  
(month/day/year) (month/day/year)

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

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

City, State, Zip: \_\_\_\_\_  
(Please Print)

In the event of an error, I give St. Michael's The Ridge Church permission to debit or credit my account for the amount needed to correct the error.

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*