



My Gift to the Archdiocesan 2016 Catholic Services Appeal is as follows:
(This Gift Is Not Legally Binding)

Name _____

Address _____

City _____ State _____ Zip _____

Email Address _____

Pledged Amount \$ _____

Initial Payment Enclosed \$ _____

Balance \$ _____

My check, payable to "St. Mary of the Hills CSA 2016", is enclosed.

Please send a Reminder Envelope as indicated below:

9 Monthly Payments (starting in July)

Quarterly (Jul/Oct/Jan/Apr)

Make Checks Payable to
St. Mary of the Hills CSA 2016

Signed _____

Parish Auditors Use Only

\$ _____

Initial Payment

Check

Cash



Date

Auditor