Our Commitment In Falth

Our Commitment in Faith

I/We wish to help shape the future of St. Mary of Mount Carmel Catholic Church by providing financial support for the Our PARISH - Our FUTURE Capital Campaign for Campus Improvements.

Name(s):		
Address:		
City:	State:	Zip Code:
Between December 1, 2022 other assets) the sum of:	and November 30, 2027	, I/we commit and agree to pay (in cash or
TOTAL COMMITMENT:	\$	_
NOW ENCLOSED:	\$	(please consider a 10% initial payment)
LEAVING A BALANCE OF:	\$	_
This commitment is given ov	er the following number	of years:3 years4 years5 years
OR: I/We wish to give the labor/materials:	e following stock, securi	ties, property, or contributed construction
I/We plan to offer our comn	nitment (please check one): Weekly Monthly Annually
I/We wish to arrange foTransfer agreement (EFTPlease call me/us to disc	r automatic payment of) is attached. cuss a transfer of stock or	f my/our contribution. An Electronic Funds
Signature:		Date:
Signature:		Date:

- Your commitment is a declaration of intention and is not legally binding.
- Your contribution may or may not be tax deductible. Please consult with your financial planner and/or tax advisor.
- Make checks payable to: St. Mary of Mount Carmel Catholic Church and write Our Parish –
 Our Future in the memo portion.
- Please complete this commitment form and return it in the confidential envelope to your Pastor, by placing it in the Sunday collection basket, or dropping it off at the parish office.
- Kindly respond to this request within 10 days to save a follow-up phone call.

Thank you for your financial commitment for the Vision of St. Mary of Mount Carmel Catholic Church and School

Our PARISH - Our FUTURE

A Capital Campaign for Campus Improvements

Electronic Funds Transfer (EFT)

It is possible to have your capital campaign contributions to St. Mary of Mount Carmel Catholic Church offered electronically. Please fill out this form, sign and date, and attach a voided check or a blank savings deposit slip and put both documents in the CONFIDENTIAL envelope with your commitment form. Thank you!

Name:		
Address:		
City:	State:	Zip Code:
Phone:	Email:	·
Our Parish – Our Future Capital Can	npaign	
Contribution Biweekly / Monthly / Yearly	Start Date	Frequency (circle one)
\$	//	Biweekly (5 th and 18 th) Monthly (18 th) Yearly 5 th (indicate month)
entries to my checking/savings Mary of Mount Carmel Catholic be sufficient to allow the bank of any entry by notifying my bo	account. This author Church in writing to a reasonable opportu Ink three days before ous charge immediat	h in Long Prairie, Minnesota to initiate ity will remain in effect until I notify St. cancel it. This cancellation time must unity to act on it. I can stop payment my account is to be charged. I can rely credited to my account up to 60 my bank statement.
Name of Financial Institution:		
Address of Financial Institution:		
CheckingSavings	Account Number:	
Financial Institution Routing Nun	nber:	
Account Name Signature:		Date:
Account Name Signature:	Date:	
Ploase street s	voided check or a blan	ak savinas donosit slin

Please attach a voided check or a blank savings deposit slip.

Thank you!