



Gift & Pledge Intention

Name _____ Phone _____

Address _____ City _____ State _____ Zip _____

Email Address _____

Gift Information:

I (We) intend to contribute \$ _____ to *Hope. Home. Community. - A Capital Campaign to transform the Green Bay area with a holistic solution to homelessness* at St. John's Ministries.

This gift will be paid as follows:

- Single payment
- Multiple payments – I will pay the pledge over (circle one) one/two/three/four/five years as follows:
 - Annually Quarterly Monthly

_____ Starting Date – Ending Date

Gift Details: _____

Payment Information:

- My check is enclosed payable to: **St. John's Ministries**
- Gift of Stock (Please contact Julie Kozak at 920-617-8712 for transfer details.)
- Donor Advised Fund (DAF) (Please contact Julie Kozak at 920-617-8712 for transfer details.)
- Charge my credit card (circle one): American Express / Visa / MasterCard / Discover

Card#: _____ Expiration Date: ____ / ____
Month Year

Name on Card: _____ 3-digit CSC on back of card: _____

Credit Card Authorization:

Signature: _____ Date: _____

Donor Recognition:

- Please publicly recognize this gift from: _____
As you wish your name(s) to appear
- I am interested in the following Named Gift: _____
Note: Refer to list of named gifts; subject to availability
- Please do not recognize this gift publicly. I (We) wish for the gift to be ANONYMOUS
- This gift is in honor of / in memory of: _____

Signature: _____ Date: _____

**Please return this form, with payment if applicable, to:
St. John's Ministries, P.O. Box 1743, Green Bay, WI 54305**

For additional information, contact Alexia Wood at 920-617-8700, ext. 109/awood@sjehs.org

St. John's Ministries is a registered 501(c)(3) organization, and your donation is tax deductible as allowed by law. Federal ID #: 262892934

Thank you for transforming the Green Bay area with a holistic solution to homelessness!