Please Print *Use Letra Molde*

Name *Nombre* _____

First Name *Primero Nombre* Spouse *Esposa/Esposo* Last Name *Apellido*

Address *Direccion* _____

City *Ciudad* _____ **State** *Estado* _____ **Zip** *Codigo Postal* _____

E-Mail _____

Telephone *Telefono* ( ) _____

Parish *Parroquia* _____

_____ _____

Donor's Signature *Firma* **Date** *Fecha*

Total Pledge for 2012 (year)
Ofrenda Total Para 2012 (año) .

Today's Contribution
Contribucion de Hoy .

Balance to be paid by 12/31
Balance a ser contribuido para 12/31 .

If not paid in full, pledge reminders will be sent as follows:

- **Monthly reminders** ($250 pledge or more)
- **Semi-Annual reminders** ($49-$25 pledge)
- **Quarterly reminders** ($249-$50 pledge)
- **One reminder** ($24 or less)
- **I do not want any reminders** ____ **Other** _____

Payment Options: *(Please do not mail cash)*

Check: Please make check payable to Annual Catholic Appeal

Credit Card On-line: Make your pledge and payment on-line at *www.archdiosf.org*

Electronic Debit Transfer: Request ACA authorization form. (505) 831-8155