

**4Saints Episcopal Food Pantry  
Pledge Form**

EIN: 81-5377994

Donor's name: \_\_\_\_\_  
*(Please list name as you wish to be acknowledged by 4Saints)*

Street address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home phone number: \_\_\_\_\_ Other phone number: \_\_\_\_\_

Email: \_\_\_\_\_

Gift purposes and objectives: \_\_\_\_\_

CONTRIBUTION:

Please accept my contribution in the amount of \$\_\_\_\_\_ to the 4Saints Episcopal Food Pantry.

CAMPAIGN:

- Annual Operating Campaign
- Village on East Lancaster Capital Campaign*

DEDICATION: This gift is in (honor)(memory) of \_\_\_\_\_  
*(circle one)*

METHOD OF PAYMENT:

Check enclosed made payable to the 4Saints Episcopal Food Pantry

Other: \_\_\_\_\_  
*(Description of gift instrument; i.e., cash, stock, pledge)*

MasterCard       VISA       Discover       American Express

CC #: \_\_\_\_\_ CID#: \_\_\_\_\_ Exp: \_\_\_\_\_  
*(3-4 digits)*

Name on CC: \_\_\_\_\_

Donor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

PLEDGE OF SUPPORT

Please accept my total pledge in the amount of \$\_\_\_\_\_ to the 4Saints Episcopal Food Pantry.

Pledge payments will be made over 1, 2 or 3 year *(circle one)* beginning \_\_\_\_\_ 20\_\_\_\_\_  
*(month) (year)*

Accepted by: \_\_\_\_\_ Date: \_\_\_\_\_  
*(Representative of 4Saints Episcopal Food Pantry)*

HOW TO PLEDGE YOUR SUPPORT TO 4SAINTS:

1. Print out & complete Pledge Form
2. Mail completed form to:

**4Saints Episcopal Food Pantry  
P.O. Box 8695  
Fort Worth, Texas 76124-0695**

3. Take pleasure in knowing your support is going to a worthwhile cause.

If you have questions regarding 4Saints annual campaign or the *Village on East Lancaster Capital Campaign*, please contact Victor Mashburn at 817/609-4122.

*All gifts are tax deductible to the fullest extent of the law. Please make checks payable to "4Saints Episcopal Food Pantry" with "Annual Support" or "Capital Campaign" in the memo field.*

On behalf of the 4Saints' Board of Directors, clients and volunteers, THANK YOU!