



**The Class of 1974 Endowment
LETTER OF COMMITMENT
Saint Xavier High School**

Donor Information

| | | | |
|----------------------|--|------------------------|-----------------|
| Donor(s) Name | | | |
| Address | | City | State |
| Preferred Phone Type | | Preferred Phone Number | Preferred Email |

Gift Amount *(Please indicate the intended total gift amount)*

| | |
|-------------------|----------|
| TOTAL Gift Amount | Other \$ |
|-------------------|----------|

Gift Information *(please choose one below)*

| | | |
|--------------------------|------------------------|--|
| <input type="checkbox"/> | Cash Gift | Please make your check payable to: <i>Saint Xavier High School</i> |
| <input type="checkbox"/> | Appreciated Securities | Please contact Mike Littell with transfer Instructions at (502) 637-8485 |
| <input type="checkbox"/> | Pledged Gift | Please complete the Pledge Schedule below |
| <input type="checkbox"/> | Online Gift | Make your donation at saintx.com/1974 |
| <input type="checkbox"/> | Estate Gift | I have included St. X in my will, as a beneficiary of my IRA, or through another estate inclusion. Please contact Chuck Willenbrink at (502) 637-8485 for information. |

Pledge Schedule

| | | | |
|-----------------|-------|--------------------|------------|
| Pledge Duration | | Reminder Frequency | Start Date |
| | Other | | |

Memorial/Honorarium *(please choose one below)*

| | | |
|--------------------------|-----------------|--------------|
| <input type="checkbox"/> | Memorial Gift | In Memory of |
| <input type="checkbox"/> | Honorarium Gift | In Honor of |

Gift Recognition *(please select only if you wish for your gift to be anonymous)*

| | | |
|--------------------------|-----------|--|
| <input type="checkbox"/> | Anonymous | Name will appear as Anonymous in all donor publications |
|--------------------------|-----------|--|

Matching Gift

| | | |
|--------------------------|-------------------------------|------------------------------|
| <input type="checkbox"/> | My Company Will Match My Gift | The matching gift contact is |
|--------------------------|-------------------------------|------------------------------|

Signature: _____ Date: ____/____/____
*Please note that your name typed above serves as an e-signature on this form.

Complete your commitment form online at saintx.com/1974 or email this form to awalker@saintx.com

Saint Xavier High School • 1609 Poplar Level Road, Louisville, KY 40217 • (502) 637-8485