



SAINT THOMAS ACADEMY

Pledge Agreement

I/We, _____, are delighted to make a total pledge of \$ _____ as a donation to Saint Thomas Academy. This letter documents our financial commitment and serves as the formal statement of intent to provide this gift to Saint Thomas Academy (STA). We recognize STA as a not-for-profit 501(c)3 institution.

For charitable income tax purposes, we have made note of STA's tax identification number: 41-6045110.

Gift Designation (choose all that apply):

☐ **Unrestricted Gift of \$ _____, pledged over # _____ years.** To provide STA with the greatest flexibility, a portion of this gift potentially may be used for expenses related to managing the campaign.

☒ **Restricted Gift of \$ _____, pledged over # _____ years, to be used for the following:**
Class of 1975 Endowment

Pledge Payment Schedule and Details (choose all that apply; Saint Thomas Academy will send reminders in accordance with payment schedules; please make checks payable to Saint Thomas Academy):

☐ I/We have enclosed an **initial pledge payment** of \$ _____ with this agreement.

Remaining Pledge Balance: \$ _____

☐ The **first pledge payment** of \$ _____ will be paid on (date) _____

☐ **Subsequent pledge payments** will be paid: ☐ **Annually** ☐ **Semi-Annually** ☐ **Quarterly** ☐ **Monthly**

In equal installments of \$ _____

Ending on (date) _____ in FY _____

☐ This donation will be made using the following gift instrument (cash, stock, securities, etc.): _____

☐ This donation will be matched by: _____

Gift Recognition (choose all that apply):

☐ Please list the following name in all published lists: _____

☐ Please list "Anonymous" on lists that indicate gift levels. ☐ Please list "Anonymous" in all published lists.

Donor Advised Funds, ONLY (we encourage you to work with your financial custodian to fulfill this grant recommendation):

I will recommend a ☐ monthly ☐ quarterly ☐ annual grant of \$ _____

for # _____ years from the _____ (Donor Advised Fund and Financial Custodian).

We are proud to able to provide this gift for Saint Thomas Academy at this exciting time.

Signature – Donor _____

Date _____

Signature – Donor _____

Date _____

Signature –
Director of Advancement _____

Date _____

Signature – President _____

Date _____

PLEASE RETURN TO:

Tony Mullen • Director of Advancement

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