

Please accept my donation/pledge to the *imagine* MORE Capital Campaign in the amount of \$ _____

- One time contribution Check #: _____
- Pledge Payment Beginning Date: _____
- Yearly amount of: _____ Semi-annual amount of: _____
- Quarterly amount of: _____ Monthly amount of: _____

Name: _____ Email: _____
(How your name will appear in publication)

Address: _____ City/State/Zip: _____

Phone: _____ STJ Class of: _____

