

Mercy Foundation North

Golden Umbrella

Pledge Statement

Print Full Name: _____

Address: _____

City, State, Zip: _____

Phone: Home: _____ Work: _____

I pledge to Mercy Foundation North, the sum of \$ _____ to be paid over a period of ____ year(s) for the benefit of the _____ project and/or Department at _____ Facility.

First payment will be made in (month) _____ of (year)_____.

Please send pledge payment reminders: (Check One) Annually Quarterly Monthly

PAYMENT OPTIONS:

I wish to pay by check. Please make checks payable to "Mercy Foundation North."

I wish to pay by Credit Card. Credit Card authorization (for initial payment):

Visa Mastercard Discover

Card # _____ Exp. Date _____

Signature _____ Three digit Security Code: _____

Signature _____

Date _____

For further information, please call Mercy Foundation North at (530)247-3424.

**Please return completed, signed and dated form to
Mercy Foundation North
via postal mail addressed to:
Mercy Foundation North, 2400 Washington Avenue, Suite 410, Redding, CA 96001.**

*"We should be as the compass that goes round its circle without stirring from its center. Now our center is God from whom all our actions should spring as from their source..."
Catherine McAuley*