



Sisters of Charity, BVM Mail-In Contribution Form

Print this form and mail to:

Office of Development
Sisters of Charity, BVM
1100 Carmel Drive
Dubuque, IA 52003-7991

Please type or print:

Name _____

Address _____

City/State/Zip _____

Telephone _____

Email _____

Birthday _____

As a token of our appreciation for your support, the Sisters would like to pray for you, by name, on your birthday.

Donation Amount \$25 \$50 \$100 \$250 \$500 Other \$_____

My gift is enclosed (*please make checks payable to the Sisters of Charity, BVM. Your gift is tax deductible as provided by law.*)

Please charge my credit card: Visa Mastercard American Express Discover

Credit Card Number _____ Expiration Date _____

Signature _____

Please use my gift for: Where the need is greatest

Fund

Education and Ministry Fund

Other _____

In Memory of _____

In Honor of _____

Comments _____

Thank you for supporting the life and ministries of the Sisters of Charity, BVM.