Sisters of the Presentation Mail-In Contribution Form

Print this form and mail with your donation to:

Partners in Mission Office Sisters of the Presentation 2360 Carter Road Dubuque, IA 52001



| Please type or print: | |
|---|--|
| Prefix | |
| Name | |
| Spouses Name | |
| Address | |
| City/State/Zip | |
| Country | |
| Please complete the phone and email information so we can contact you if there are any questions regardin send a confirmation of your gift. | g your gift. We will also use the email information to |
| Home Phone | |
| Cell Phone | |
| Email | |
| May we contact you at your email address? \square yes \square no | |
| My gift is enclosed: (Please make checks payable to the Sisters of the Presentation. Your gift is tax deduc | tible as provided by law.) |
| ☐ General Donation: Where the need is greatest | |
| Donation Amount: ☐ \$25 ☐ \$50 ☐ \$100 ☐ \$250 ☐ \$500 ☐ Other \$ | |
| ☐ Memorial & Honorary Gift: Remember or honor a loved one | |
| In Memory of | |
| In Honor of | |
| Please use \$10 to have a mass: ☐ Yes ☐ No | |
| Without mentioning the amount, please send an acknowledgment of my gift to | : |
| | |
| | |
| Comments | |
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| | |

If your employer offers a matching gift program, please send form to:

Partners in Mission Office Sisters of the Presentation 2360 Carter Road Dubuque, IA 52001

| ☐ How are you affiliated with us? | |
|--|-----------------------------|
| ☐ How did you hear about us? | |
| □ Would you be interested in receiving e-news? □ Would you be interested in learning about the Presentation Associate Partnership? □ Would you be interested in learning about service through Presentation Quest? | |
| □ I would like to remember the Sisters of the Presentation in my will. Please send me information □ I am considering a gift of stocks, bonds, matching gift or other method. Please send me information □ I have included the Sisters of the Presentation in my estate plans. Please let us know so we can | ation of how I can do this. |
| Thank you for supporting the life and ministries of the Sisters of the Presentation. | |
| Please check this box to consent to allowing your data to be stored within the guidelines outlined i I Agree | n our privacy policy.* |