

Enclosed is my check payable to Holy Name Foundation

Please charge my credit card: Visa MasterCard American Express Discover

Card #: _____ Exp. Date _____

Billing Address: _____

Name as it appears on the credit card: _____

Signature: _____



Please remove me from your mailing list

I will make a donation of \$ _____

My contribution will be sent from my Donor Advised Fund at _____

My employer will match my gift - I have included a matching gift form.

Please contact me about including Holy Name in my will or estate plan, or about giving from my IRA or Stock.

THIS GIFT IS FROM:

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Please use my gift: Where Needed Most Other: _____

THIS GIFT IS: In memory of (or) In honor of: _____

Please send an acknowledgement of my gift to:

Name: _____ Address: _____

City: _____ State: _____ Zip: _____

Holy Name Foundation is a not-for-profit charitable organization and our tax identification number is: 22-2737143. Contributions are tax deductible to the fullest extent of the law and donors receive acknowledgment of their contributions.