



Please mail this form and your check to:

Catholic Charities

Diocese of Venice

P.O. Box 2116

Venice, FL 34284

Date: _____ (Please PRINT all information clearly)

Enclosed is my check in the amount of \$ _____ payable to Catholic Charities.

My name: _____

Address: _____ Home phone: (_____) _____

City: _____ Email: _____

State/Zip: _____

(Receipt will be sent to the address above.)

Type of Donation *(please mark)*

- | | |
|--|---|
| <input type="checkbox"/> Christmas Appeal | <input type="checkbox"/> Education Programs |
| <input type="checkbox"/> Catholic Charities program _____
<i>(program name)</i> | <input type="checkbox"/> Where needed most |

Gift in memory of: _____
(name of deceased)

Send acknowledgment letter to:

Name: _____

Address: _____

City/State/Zip: _____

How would you like the letter to be signed? _____
(name or names)

Gift in honor of: _____
(name of deceased)

Send acknowledgment letter to:

Name: _____

Address: _____

City/State/Zip: _____

How would you like the letter to be signed? _____
(name or names)

Thank you for your support of Catholic Charities.

Your contribution is tax-deductible.