## Yes! I want to support the mission of the Benedictine Sisters! First & Last Name: Address: City, State, Zip: Email: Phone: Would you like to receive further mailings from us? \_\_ yes (Please complete the above information) Please accept my/our tax-deductible gift of: \_\_\$1,000 \_\_\_\$500 \_\_\_\$250 \_\_\_\$100 \_\_\_\$50 \_\_\_\$25 \_\_\_Other \$\_\_\_\_ Please direct my gift to: Unrestricted \_\_\_ Sisters' Retirement Needs \_\_\_Monastery Building Fund \_\_\_Corporate Responsibility Caridad de Corazón \_\_\_\_ I/we wish to remain anonymous. All gifts are acknowledged upon receipt and used only for the purposes designated. Your information is never sold. Unless otherwise noted above, your name will appear in our annual giving report. Thank you for your support! **Tribute Gifts** I/we would like to make my/our gift: In honor of: In memory of: Please mail a notification card to: