Sisters of St. Francis of the Holy Cross

Donate by mail

Please complete this form and mail it and your gift to: St. Francis Convent, c/o Development Office 3110 Nicolet Dr. Green Bay, WI 54311

Your Information		
First & Last Name:		
Address:		
City:	State:	ZIP:
Telephone:	Email:	
Your Designation		
Please use my gift for (check one or designate a dollar amount for each):		
Sisters' Area of Greatest Need	Sisters' Living Expenses	
Sisters' Retirement Needs	Sisters' Ministry to Persons in Need	
Your Gift		
Donation Amount: Signature:		
Payment options:Check (enclosed) Credit Card (circle one):	Visa Mastercard	Discover
Card # Exp. Date	Card Verifi	cation #
Frequency (circle one): One-Time Gift Mo	nthly Quarterly An	nually
Your Dedication		
Gifts may be given in memory of the deceased or in honor of a special occasion.		
Type of gift card (circle one): Memorial Card	Special Occasion Ca	rd
Name of the person to be remembered:		
Name and address of person to whom we should send a card:		

The Sisters of St. Francis of the Holy Cross thank you for your generosity. We remember you daily in our prayers. Your gift is tax deductible to the extent allowed by law.