

FOR BROOKLYN AND QUEENS

I/We would like to support as:

- ☐ Catholic Youth Ministry Initiative
- ☐ Catholic Migration Services
- ☐ Catholic Communications
- ☐ General Support

With a gift of:

- <u></u>\$100 **\$250**
- □\$500 **\$1,000**
- □ \$1,500 □Other\$

With a monthly gift, for 12 months, of:

- \$10
- **\$25**
- □ \$125 □\$150
- □\$100 □Other:

Payment Options:

☐ I/We would like to receive information on including Catholic Foundation for Brooklyn and Queens in my estate planning.

Name Address _ City _ State Phone.

☐ My company matches gifts. Please see my enclosed Matching Gift form.

☐ Enclosed is my check, made payable to Catholic Foundation for Brooklyn and Queens.

☐ Please charge my credit card:

☐ Visa ■MasterCard

□Discover □Amex

Card #_ Exp. Signature