



**St. Joseph Center Contribution Form**

Please print this form and send it in an envelope with your contribution to:

St. Joseph Center  
Attn: Development  
204 Hampton Drive  
Venice, CA 90291

**Please accept my tax-deductible gift of:**

\$500       \$250       \$150       \$75       \$50       Other \_\_\_\_\_

**Please direct my gift to:**

Help where it's needed most       Help Children       Help Homeless Men, Women, and Children  
 Help Hungry Families       Help Seniors       Help with Job Training

**MY CONTACT INFORMATION:**

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone (w) \_\_\_\_\_ (h) \_\_\_\_\_

E-mail \_\_\_\_\_

Please send me information on Planned Giving and Estate Planning options.

Please make my gift a **tribute or memorial:**

In Honor of: \_\_\_\_\_ or

In Memory of: \_\_\_\_\_

**Please send a notice of my tribute/memorial to:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Personal Message: \_\_\_\_\_

**PAYMENT:**

**By Check**

Enclosed please find a check made out to St. Joseph Center for \$ \_\_\_\_\_

**By Credit Card**

Please bill my credit card (circle one):    VISA            MC            AMEX

Card No. \_\_\_\_\_ Exp. \_\_\_\_\_

Name (print) \_\_\_\_\_

Signature \_\_\_\_\_

Payment in full       Please bill me monthly (minimum \$25)

**St. Joseph Center is a 501(c)(3) nonprofit organization (Federal Tax ID: 95-3874381) and charitable gifts are tax deductible to the fullest extent of the law. For more information please call 310-396-6468 x335.**

*St Joseph Center values your privacy and never shares contributor information with any other businesses, agencies, or organizations.*