



# St. Joseph Center Contribution Form

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

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

Please accept my one time tax-deductible gift of:

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

I would like to give a monthly gift by Credit Card of  \$10     \$15     \$25     Other \_\_\_\_\_

Please direct my gift to:

Help where it's needed most     Help Homeless Men, Women, and Children  
 Help Hungry Families     Help with Job Training     Other Program: \_\_\_\_\_

## MY CONTACT INFORMATION

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

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

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

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

Please make my gift a tribute or memorial:

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

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. \_\_\_\_\_

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

Signature \_\_\_\_\_

Payment in full

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.



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