

**I/We accept your invitation to become a member of
Catholic Charities Spirit Circle!**

My total gift is
(*\$2000 or more, \$1000, or \$500*) \$ _____

Paid Now \$ _____

**Balance to be
paid in installments** \$ _____

Name _____

Address _____

Email _____

Four Ways To Make Your Gift.

1. Please make check payable to Catholic Charities.
2. Please charge my gift to:

Visa Mastercard Discover

Card Number _____

Expiration Date _____

Signature _____

Phone _____

3. Electronic Funds Transfers (EFTs) are monthly recurring charges that are debited from either your checking or savings account starting in the month of _____ and ending in _____. Please accept my monthly gift of \$ _____ to be billed directly to my:

Checking Account (please include a voided check)

Savings Account (please include a savings account slip)

Signature _____

Date _____

Phone _____

4. Make your gift on-line. Visit www.ccwinona.org and designate "Spirit Circle."



Installment Payments

Preference for reminder statements:

Monthly (June through December)

4 Reminders (June, August, October, December)

Recognition Preferences

I/We wish to be acknowledged in future
Catholic Charities Spirit Circle publications.

I/We prefer not to be acknowledged in future
Catholic Charities Spirit Circle publications.