<Parish Name> <Parish city>

First Name	Last Name	
Address	Apartment/Unit #	New Address
City	State	Zip
Telephone	E-Mail	
Please do not se		0
Please do not se	nd Acknowledgment/Than	ik You.
Please do not se	nd Tax Statements.	

This gift is anonymous.



One-Time Gift (Paid in Full)

\$200

(

□ Monthly Pledge (Monthly until 6/30/2024)

Sustaining Member Gift (Indefinite monthly withdrawal)



Please select one of the following amounts\$250\$100\$25

\$75

Other:	\$
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Total Amount Pledged \$_____ Total Amount Enclosed \$_____

Please make checks payable to the Diocesan Annual Appeal. Please do not send cash.

(Note: See reverse side for Electronic Fund Transfers (EFT) and Credit Card payments information. Gift of Securities, Stock or Grain, please call Stewardship and Development Office 608-791-2653.)

For questions and comments, contact Sarah at 608-791-2653 or skomperud@diolc.org

□ Sustaining Gift, I authorize the Diocese of La Crosse to automatically withdraw from my checking account or debit my credit card account on the 15th of every month. Donations will continue indefinitely until notification to cancel is given to the Diocese of La Crosse.

□ For Electronic Funds Transfer from a checking account, please enclose a voided check.

\Box Credit Card: \Box VISA \Box N	IASTERCARD 🗌 DISCOVER 🗌 AMERICAN EX	(PRESS
Card Number:		Thank you for
		6
Cardholder Name		your support
Email		GIVE ONLINE
Signature	Date	GIVE UNLINE
By signing, I authorize the Diocese of La Crosse to debit/charge my account as listed above.		ve. diolc.org/donate-online

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