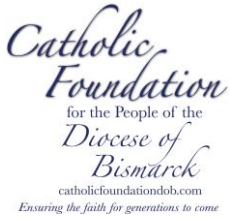


MAIL IN FORM



Please print and return this with your remittance.
A receipt will be mailed to you.
We are truly grateful for your support.

Amount Enclosed
\$ _____

Payment Selection: MasterCard or Visa Acct. # _____

Print Name as it appears on the card _____ CVC _____

Exp. Date _____ Signature _____ Date _____

I would like this set up as a recurring payment on the ____ day of each month until I cancel.

Check: Made payable to the **Catholic Foundation**

Online: **www.CatholicFoundationdob.com/donate**

I request that my donation be designated to the following endowment(s):

- Seminarian Scholarship Endowment Fund
- Priests' Care Endowment Fund
- Catholic School and Religious Education Fund
- An Individual Parish Endowment Fund
(Name and Location of Parish) _____
- An Individual Catholic School Endowment Fund
(Name and Location of School/School System) _____
- Home on the Range Foundation
- Bishop of Bismarck Endowment Fund
- Youth & Young Adult Ministry
- Women Religious Vocation Endowment Fund
- An Individual Named Family Endowment Fund
(Name of Family Endowment) _____

***Interested in establishing a family endowment to benefit the Bismarck Diocese?
Contact Eve Mercer at 701-204-7229

Please mail this form to the Catholic Foundation at PO Box 1137, Bismarck, ND 58502

Remember that annual, combined donations of \$5000 or more to a single, qualified ND endowment may qualify for a 40% ND Tax Credit!

*Contributions to the Catholic Foundation are tax-deductible as permitted by law.
Please call 701-204-7206 with any questions.*