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Name _____

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I wish to help the Sisters of St. Joseph carry on their work. I am enclosing:

- \$10 \$20 \$50 \$100 \$200 \$_____ Cash Check
 VISA Master Card Discover American Express

Credit Card Number _____ Expiration Date _____

Verification Code _____ (The verification code is the 3 or 4 digit number found either on the front of the credit card, or to the right of your signature on the back of the card)

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Please use my tax-deductible gift for:

- SSJ Ministries
 Care of retired/infirm Sisters
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Special instructions (intentions, remembrances, etc.)

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mission and ministries...*