

Mail Donation Form

Yes, I want to make a donation the General Catholic Charities fund or to a particular program or programs indicated below.

Send Donations to: Catholic Charities  
P.O. Box 109650  
Palm Beach Gardens, Florida 33410-9650

Please make checks payable to Catholic Charities of the Diocese of Palm Beach

- |  |   |
|--|---|
| <input type="checkbox"/> Catholic Charities General Fund                   | <input type="checkbox"/> Immigration Legal Services               |
| <input type="checkbox"/> Birthline/Lifeline Pregnancy Care Centers         | <input type="checkbox"/> Interfaith Health and Wellness           |
| <input type="checkbox"/> Catholic Relief Services/Parish Social Ministries | <input type="checkbox"/> Prison Ministry                          |
| <input type="checkbox"/> Counseling Services                               | <input type="checkbox"/> Refugee Resettlement & Human Trafficking |
| <input type="checkbox"/> Elder Affairs/Guardianship Training               | <input type="checkbox"/> Respect Life/Rachel's Vineyard           |
| <input type="checkbox"/> Hunger, Homeless Outreach                         | <input type="checkbox"/> Transitional Housing/Samaritan Center    |
|  | <input type="checkbox"/> Volunteer Services                       |

\_\_\_\_\_  
**Print Your Name**

\_\_\_\_\_  
**Address**

\_\_\_\_\_  
**City**

\_\_\_\_\_  
**State**

\_\_\_\_\_  
**Zip**

\_\_\_\_\_  
**Sign Your Name**

\_\_\_\_\_  
**Date**

**Payment Method:**  Enclosed check  Credit Card

If using a credit card, please circle the type of card:

VISA                      MasterCard                      AMEX

Charge Amount: \_\_\_\_\_

Card Number: \_\_\_\_\_

Expiration (MM/YY) \_\_\_\_\_

CV Number (3 or 4 digit number on the back): \_\_\_\_\_