



Illinois State Council K of C Charities, Inc.

www.illinoisknights.org



Newman Catholic Ministry Program

Worthy Newman Chairman:

You can count on me to continue to provide a “**Home Parish**” for our Catholic students away at school. Please accept my **Tax Deductible Donation** to help with the Newman program.

Charity year is from July 1, 2017-June 30, 2018

- ___ \$5.00 ___ \$10.00 ___ \$15.00 ___ \$25.00 ___ \$50.00 ___ \$75.00
- ___ \$25.00 “Quarter Century” (1 payment for 4 consecutive years)
- ___ \$50.00 “Half Century” (1 payment for 2 consecutive years)
- ___ \$100.00 Century Donor

- () check here if 1- \$100.00 payment will be made in the charity year
- () check here if 4- \$25.00 payments will be made in the charity year
- () check here if 2- \$50.00 payments will be made in the charity year
- ___ \$1000.00 Grand Century Donor ___ \$5000.00 Grand Century Patron
- ___ Other

PLEASE COMPLETE THE FOLLOWING:

Name: _____ Membership No. _____
 Address: _____ Council No. _____
 City/State/Zip: _____

Please make checks payable to: Illinois State Council K. of C. Charities, Inc.

(Note: indicate “Newman Fund” in the memo line on the check)

IF MAKING A CREDIT CARD DONATION					
C/C Type	Visa	Card#		Exp. Date	
	MasterCard	Card#		Sec. Code	

Send pin to: ME at my home address above _____ My Council _____

Please mail to: Illinois State Council K of C Charities, Inc.

**P.O. Box 681
 Kankakee, IL 60901-0681**

CHOSEN TO GO AND BEAR FRUIT THAT WILL REMAIN