

# Reaching Out, Healing Together

## 2021 ARCHBISHOP'S ANNUAL APPEAL

Please use my/our gift to continue the Good Works of our Church  
and help support the ministries of the Archdiocese.

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Parish \_\_\_\_\_

Parish Town \_\_\_\_\_

Please complete and mail this form to:

**Archbishop's Annual Appeal**

**P.O. Box 28**

**Hartford, CT 06141**

**800-781-2550**

Total Gift: \$ \_\_\_\_\_

Amount Enclosed: \$ \_\_\_\_\_

Balance: \$ \_\_\_\_\_

### Gift

\$2,500

\$1,000

\$500

\$250

\$150

\$ \_\_\_\_\_

### 5 Monthly Payments

\$500 per month

\$200 per month

\$100 per month

\$50 per month

\$30 per month

\$ \_\_\_\_\_

Please check one and fill in completely

**Paid in full**

*Please make checks payable to: Archbishop's Annual Appeal*

**Credit Card** *(Please complete below)*

**Securities**

Please charge my credit card for \$ \_\_\_\_\_.

Card No. \_\_\_\_\_

Expiration Date: (mm/yy) \_\_\_\_ / \_\_\_\_ CSV \_\_\_\_

Cardholder Signature: \_\_\_\_\_

(I understand my credit card will be charged this **ONE** time **ONLY** for the amount indicated above.)



- Yes**, please send me information about ways to include the Archbishop's Annual Appeal in my will.
- Matching Gifts**, please complete the above form and contact your employer for information.
- Securities**, please complete the above form and contact Linda Carroll at 860-541-6491.

***Thank you for your contribution to the 2021 Archbishop's Annual Appeal!***

*Gifts are Tax Deductible to the Full Extent of the Law*

