

Fund
St. Paul the Apostle
Catholic School

Annual
2018-19



St. Paul the Apostle Catholic School
130 Woodlawn Avenue
Joliet, IL 60435

2018-19 Annual Appeal

My Pledge or Gift.....\$ _____

is in memory of _____

Payment at this time.....\$ _____

Balance.....\$ _____

I WISH TO PAY THE BALANCE IN

12 monthly payments
(Calendar year 2018)

Other (*please note*) _____

My Company will Match my gift:

(*Company Name*)

Please make
checks
payable to:

**St. Paul the
Apostle
Catholic School
ANNUAL
FUND**

Suggested Giving Guide

Major Gifts

\$25,000 \$10,000 \$5,000

Patron Gifts

Today's Gift	10 Monthly Payments	Total Gift
25	25	250
50	50	500
75	75	750
100	100	1000

Signature of Donor

Please check all that apply:

____ Parishioner-St. Paul the Apostle

____ Alumni – St. Paul the Apostle

____ School Family

____ Friend

____ Grandparent

____ Community Member

Donor Name _____

Address _____

City/State/Zip _____

Phone _____

Email _____

Please send me information about remembering St. Paul the Apostle Catholic School in my Will

I have already remembered St. Paul the Apostle Catholic School in my Will

Please send me information on how to GIVE to charity and GET income for life.

Please do NOT include my name in the Annual Report