



ITALIAN CATHOLIC FEDERATION
A CONTINUOUS GIFT
COLLEGE SCHOLARSHIP PROGRAM • MY GIFT IS FOR:

- | | |
|--|---|
| <input type="checkbox"/> Get Well Wishes | <input type="checkbox"/> Branch Anniversary _____ |
| <input type="checkbox"/> Wedding Anniversary | <input type="checkbox"/> In Memory of _____ |
| <input type="checkbox"/> Birthday | <input type="checkbox"/> In Honor of _____ |
| | <input type="checkbox"/> Other _____ |

Enclosed is my gift of: \$ 10 _____ \$ 25 _____ \$ 50 _____ \$ 100 _____ Other \$ _____
\$ 400 1st Year _____ \$ 500 2nd Year _____ \$ 600 3rd Year _____ \$ 1,000 4th Year _____

An acknowledgment will be sent to the
Individual (s) you name below:

Name _____

Address _____

City/State/Zip _____

Name of Contributor (Please print your name as you
wish it to appear.)

Your Name _____

Address _____

City/State/Zip _____

Phone _____ E-Mail _____