

PETER CLAVER CENTER

Please make your check payable to **Peter Claver Center**:
Please mail this completed form, with your payment to:
The Peter Claver Center, 172 South Chicago Street, Joliet, IL 60436-1755

I am making a gift of: \$1,000 _____ \$500 _____ \$250 _____
 \$100 _____ \$50 _____ \$25 _____ Other _____

I want to make this gift in honor or memory of: _____
(circle one)

Please fill in your name and address below to ensure the correct preparation of your receipt for tax purposes.

Name (s): _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Email: _____

_____ Check enclosed payable to: Peter Claver Center.

_____ Charge my credit card: ___ Amex ___ Mastercard ___ Visa ___ Discover

Number: _____ Exp. Date: _____

Verification # : _____ Signature: _____

Unless otherwise specified, your gift will be used to support the programs of The Peter Claver Center.

The Peter Claver Center is recognized as a tax-exempt organization under section 501(c)3 of the Internal Revenue Code.

If you have any questions, please call the Peter Claver Center at: (815) 280-5738.