



Illinois State Council K of C Charities, Inc.  
<http://www.illinoisknights.org>



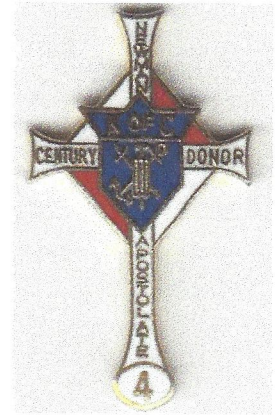
## Newman Catholic Ministry Program

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, 2016 - June 30, 2017**

- \$ 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  
  here if 1 - \$100.00 payment will be made in the Charity year  
  here if 4 - \$25.00 payments will be made in the Charity year  
  here if 2 - \$50.00 payments will be made in the Charity year  
 \$ 1,000.00 Grand Century Donor     \$ 5,000.00 Grand Century Patron  
 Other



**\* must be completed**

Name: \* \_\_\_\_\_ Membership No. \* \_\_\_\_\_

Address: \* \_\_\_\_\_ Council No. \* \_\_\_\_\_

City: \* \_\_\_\_\_ St: \* \_\_\_\_\_ 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)

CREDIT CARD DONATION									
C/C Type		Visa	Card #		Exp Date				
		Master Card	Card #		Sec Code				
DONATION AMOUNT (circle one)									
\$5	\$50	\$25 Qtr Cent	\$100		1 Payment	\$1,000		Send pin to:	<input checked="" type="checkbox"/> one
\$10	\$75	\$50 Half Cent	\$100		2 Payments	\$5,000		Me	
\$25	OTHER \$ _____		\$100		4 Payments	OTHER \$ _____		My Council	

Please Mail to: Illinois State Council K of C Charities Inc.  
 P.O. Box 681, Kankakee, IL 60901-0681

*Lead Me, Guide Me, Lord*