



# Catholic Education Foundation

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## DONATION FORM

Mr./Mrs./Ms. \_\_\_\_\_ Parish \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ E-mail \_\_\_\_\_

**Yes, I want to help. My gift for Catholic education will be:**

Total Amount \$ \_\_\_\_\_  
Amount Enclosed \$ \_\_\_\_\_ (Select payment method at right)  
Balance Due \$ \_\_\_\_\_

I would like to pay the balance in (circle one)  
monthly / bi-monthly / quarterly / single installments  
beginning \_\_\_\_\_ and ending \_\_\_\_\_.

- Please send me pledge reminders.
- Please charge installments automatically to my credit card (information at right)

Check enclosed (payable to Catholic Education Foundation).

Please charge my \_\_\_\_\_ (circle one)



Name on card \_\_\_\_\_

Card Number \_\_\_\_\_

Expiration Date \_\_\_\_/\_\_\_\_ V-Code \_\_\_\_\_ (last 3 digits on the back of your card in the signature area)

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

I would like to make my gift in memory of / in honor of \_\_\_\_\_

Please send me information on how I can make a stock gift. (All communications are held in confidence.)

Please send me information on making a planned gift.

### **MATCHING GIFTS Can Double Your Support of Catholic Education**

Many companies match charitable contributions to CEF. Please contact your employer for a matching gift form.

- I have enclosed my employer's matching gift form. Employer Name \_\_\_\_\_
- I will return my employer's matching gift form separately.