



CONGREGATION OF THE SISTERS, SERVANTS OF THE IMMACULATE HEART OF MARY

Print this page, fill it out and mail it with your donation to:

IHM Center Development Office - 2300 Adams Avenue - Scranton, PA 18509

Phone: (570) 346-5431 / E-mail: donate@sistersofihm.org / www.SistersofIHM.org

CONTRIBUTION FORM

First Name _____ Last Name _____

Address _____

City _____ State _____ ZIP _____

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I would like to:

- Become a monthly donor
 Make a one time gift

Gift Amount:

\$ _____ per month
\$ _____

Designate my gift for: Most Urgent Need Care of Retired Sisters Foreign Missions

Payment Method:

- I have enclosed a check. (Please make checks payable to Sisters of IHM)
 Credit Card (We accept VISA, MasterCard, Discover and American Express)

Card # _____ Expiration Date _____ / _____

Bank Account:

- Transfer the above amount from my bank account each month to the Sisters of IHM.
(Please enclose a check for your first month's contribution and for account verification.)

For Monthly Donors: I authorize my bank or credit card to transfer the amount indicated above to assist the Sisters of IHM, Scranton, PA each month. Should I wish to stop my automatic donations, I will notify the Sisters of IHM. A record of my monthly donations will be recorded on my regular bank or credit card statement and will serve as my receipt.

Signature _____ Date _____
(Required)

- I am interested in leaving the IHM Sisters in my will. I have already included the IHM Sisters in my estate plans

THANK YOU!

Questions? Contact Sister Kathleen Lunsman, IHM - Director of Development
Phone: (570) 346-5431 / E-mail: donate@sistersofihm.org