



Thursday September 17, 2020

I/we would like to support the vital services of Catholic Charities at the following level:

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Includes recognition during the virtual program, on the Catholic Charities website, and across Catholic Charities social media platforms

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Enclosed	is my check i	n the amount of \$
made pay	able to CATH	IOLIC CHARITIES
Please cha	arge \$	to my credit card:
NAME ON CA	RD	SECURITY CODE
CREDIT CAR	D NUMBER	EXPIRATION DATE

Please complete reverse side

Access to Virtual Gala will be provided in advance via web link Please provide the email(s) you wish to receive the Virtual Gala link:					
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For further information, please contact the Gala Office at 347-545-2501 or CatholicCharities@cmevents.net

Please mail your response to Catholic Charities Virtual Gala 1011 First Avenue, 11th Floor, New York, NY 10022

All gifts are fully tax-deductible to the extent allowed by law