

Mail in Donation Form

I wish to help the Sisters of the Presentation of the Blessed Virgin Mary carry on their work.

Name:		
Address:		
City, State, Zip:		
Phone:		
E-Mail:		
Enclosed is my gift of \$ My	wish is that this gift be used for:	
 Hispanic Ministry Caminando Juntos, Sioux Falls, S.D. Hispanic Outreach, Aberdeen, S.D., Area Clínica San José, Guatemala Kaoma Zambia, Africa (S. Virginia McCall) Kalomo Zambia, Africa (S. Deb Nelson) Presentation Sisters' Collaborative Ministry, New Orleans, La. 	 Presentation Leadership Camps Junior High - Black Hills, S.D. L.I.V.E. Latina - Omaha, Neb. Senior High - Live Out Loud Vocation Outreach Ministry Catholic School Scholarship Needy Children Needy Adults 	 PBVM International Collaborative Efforts Cojourners Sisters Retirement Sisters' Most Needed
Enclosed is a \$10 stipend for a Mass to b	be said for:	
Please use the following credit card information VISA A Mastercard Discover		
Credit Card #	Expiration Date	:/ /
Name as it appears on the card:		
My Gift is:		
In memory of:	In honor of:	
Prayer Intentions:		

1500 NORTH 2ND STREET ABERDEEN, SOUTH DAKOTA 57401-1238 PHONE (605) 229-8337 FAX: (605) 229-8527 www.presentationsisters.org