



ST. JOSEPH'S SOCIETY OF THE SACRED HEART, INC. • 911 W. LAKE AVENUE, BALTIMORE, MD 21210 • TOLL FREE: (844) 249-5730 • www.josephite.com



Yes, I would like to be a Josephite Sustaining Partner!

I will make a regular contribution of \$ _____ on the payment schedule indicated below.

***Note - we will send a reminder based on what you indicate below**

Monthly Quarterly (March, June, Sept., Dec.) Semi Annually (June, Dec.) Yearly (January)

I prefer to have automatic payments of \$ _____ taken from my credit/debit card every month.

I cannot become a Sustaining Partner right now, but wish to make a one-time gift of \$ _____

Charge my offering to my

Master Card VISA Discover Am Exp.

Card No. _____ - _____ - _____ - _____

Exp. Date. ____ / ____

Signed _____

**Send me information about
Remembering the Josephites in my Will**

Visit our website at www.josephite.com or email us at missionoffice@josephite.com

My special intentions:

- Employment
- Help for Addiction
- Deceased Person
- Financial Help
- Repair of Marriage
- Peace of Mind
- Family Reconciliation
- Health
- Vocations



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