

SAINT JOSEPH

The Provider School

ANNUAL APPEAL 2016-2017

Yes, I would like to be included in the mission of St. Joseph the Provider School. Enclosed is my donation for:

_____ (Amount not listed) _____\$25.00 _____\$50.00 _____\$100.00 _____\$250.00 or more

Secure Online Donation available at www.StJosephTheProviderSchool.com

ALL DONATIONS ARE TAX DEDUCTIBLE. CHECKS SHOULD BE MADE PAYABLE TO **St. JOSEPH THE PROVIDER SCHOOL**

MAILING ADDRESS: 1125 TURIN AVENUE, YOUNGSTOWN, OH 44510 · 330-259-0353

Please complete the reverse side

ST. JOSEPH THE PROVIDER SCHOOL

WE MEASURE EACH DAY NOT BY THE HARVEST WE REAP BUT BY THE SEEDS WE SOW

DONOR INFORMATION

Donor Name(s) _____

Business Name _____

Address _____

Phone _____

Business Phone _____

Email _____