Donation/Memorial/ Honorarium Form

Please PRINT all information on this form.

Name of Donor_____

Address_____

City_____ State_____ Zip_____

Please accept my contribution of $_____ designated for one of the following:

_____ General Fund	_____ Tuition Assistance
_____ Technology	_____ Wherever donation is needed most

Please make checks payable to All Saints Catholic School.

Your contribution is tax-deductible. **TAX ID #: 01-0728205**

Given in Honor of_____

Given in Memory of_____

Please send an acknowledgment card to:

Name_____

Address_____

City_____ State_____ Zip_____

Send to: All Saints Catholic School
2700 N. Kentucky Avenue
Roswell, NM 88201