

2022 Angel Scholarship Fund Contribution Form

Name:				
Address:		_ City:	State:	_ Zip:
Phone:	Email:			

Please complete BOTH SIDES and mail in an envelope to:

Angel Scholarship Fund, Catholic Community Foundation, 1404 East Ninth Street, Cleveland, OH 44114.



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CONTRIBUTION		PAYMENT INFORMATION
General Scholarship Fund for Students with Greatest Need	\$	I am paying by: Check (made payable to Angel Scholarship Fund)
School of my choice:	_\$	□ Credit Card:
Total Contribution:	\$	□ Visa □ Mastercard □ Discover □ AMEX
		Card Number:
		Expires: CW Code: Signature:

Please complete BOTH SIDES.

To make a monthly contribution, go to www.catholiccommunity.org/angel. For more information, call 216-902-1312.

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