



## DONOR

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State, Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

## CONTRIBUTION

Please allocate my gift:

☐ To the Greatest Need \$ \_\_\_\_\_

☐ To the school(s) of my choice. The school's name and city are:

• \_\_\_\_\_ \$ \_\_\_\_\_

• \_\_\_\_\_ \$ \_\_\_\_\_

☐ Please do not share my name with the school(s) that I selected.

Total Gift \$ \_\_\_\_\_

## GIFT INFORMATION

Your check can be made payable to **CEF-SGO** and mailed with this form to:

Catholic Education Foundation - SGO

100 East Eighth Street

Cincinnati, OH 45202

## QUESTIONS?

The Stewardship Department for the Archdiocese of Cincinnati is providing donation processing services for the Catholic Education Foundation. If you have questions about your donation, please contact the Stewardship Department at [Stewardship@CatholicAOC.org](mailto:Stewardship@CatholicAOC.org) or (513) 263.3345.