



I want to be a Faithful Friend

I have completed the reverse side of this form.
My personal information is as follows:

Name _____

Address _____

City _____

State _____

Zip _____

Phone _____

Email address _____

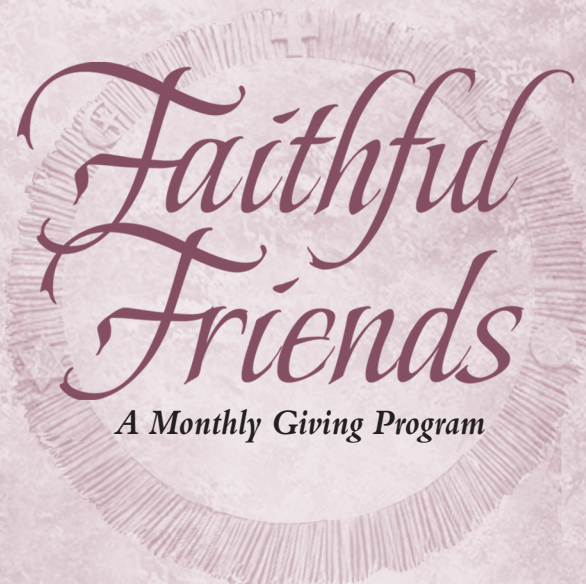
Important: Please remember to include your check
with your first month's gift.

Questions?

Please call 608-791-5282 to speak with the
development director.

*Thank you for partnering with the
Franciscan Sisters of Perpetual Adoration.*

www.fspa.org



FSPA Mission Statement

We are a community of vowed Franciscan
women centered in Eucharist, committed to
be loving presence through prayer, witness
and service.

FSPA Development Office Mission Statement

Inspired by Francis and Clare of Assisi, the
FSPA Development Office invites others to
join us in "bringing peace, sharing life and
building hope" among the materially and
spiritually poor, and to build relationships
with individuals and groups who give
current and deferred financial support to
our FSPA mission.



*Franciscan Sisters
of Perpetual Adoration*

Modern Lives. Sacred Traditions.

Development Office • 912 Market Street • La Crosse, WI 54601
608-791-5282

*Making a thoughtful commitment to the
Franciscan Sisters of
Perpetual Adoration*

*Faithful
Friends*



A Monthly Giving Program

For those dedicated to partnering with the
Franciscan Sisters of Perpetual Adoration





Questions & Answers

Q. Who are the Faithful Friends?

A. They are FSPA benefactors who make a monthly gift to help provide for the sisters and their ministries.

Q. How does this monthly giving program work?

A. You decide on a monthly gift amount that fits your budget. You authorize your bank (by using the attached form) to transfer this amount from your checking account directly to the Franciscan Sisters of Perpetual Adoration.

Q. What are the benefits?

A. To our Faithful Friends, giving is easier and more convenient, with no repetitive checks to write and no envelopes to mail. To the sisters, your donation goes further by reducing our administrative, postage and paper costs. More of your gift goes directly to the needs and ministries.

Q. Is this donation method safe?

A. YES! In fact one of the largest users of this method of funds transfer is the U.S. Social Security Administration.

Q. What record will I have of my monthly donation?

A. Your monthly checking account will show the donation date and amount. In addition, we will send you a year-end statement with your total contribution.

Q. What if I change my mind?

A. Just call us if you want to change the gift amount, stop your gift, stop the automatic donation transfers, move or change banks. We will need this information five business days in advance of a scheduled donation transfer date.

Q. How is my gift distributed?

A. As a faithful benefactor your gift may be designated to meet the needs of our ministry fund, FSPA programs or our retired sisters' fund. The designations are listed on the attached gift authorization form.

Q. How do I sign up?

A. Simply complete the attached authorization form and return in the enclosed envelope. For the process to begin we will need a check for your first month's donation. It's that simple! We'll take care of the rest!

Please retain this for your personal records:



I authorize my bank to transfer the amount indicated below to assist the Franciscan Sisters of Perpetual Adoration of La Crosse, Wisconsin, each month. Should I wish to change or stop my automatic deductions, I will call the Office of Development at 608-791-5282. My regular bank statement will serve as my receipt for these monthly gifts. I will also receive a year-end statement with the total of my contributions from the sisters.

Monthly Gift _____ Date _____

It's easy to begin

1. Please transfer my monthly gift from my checking account. I have enclosed a check made payable to the Franciscan Sisters of Perpetual Adoration (or FSPA) for my first month's contribution. My first automatic deduction will begin in four weeks.

Signature _____
Date _____

2. Indicate the desired monthly gift amount below.

☐ \$10 ☐ \$20 ☐ \$25 ☐ \$50 ☐ \$75
☐ other (\$10 minimum) _____

Use my gift as follows:

- ☐ Where need is greatest
- ☐ Ministry Fund
- ☐ Sisters' Retirement
- ☐ Affiliation
- ☐ Sister Formation – supporting our newest sisters

3. Please complete the personal information on the reverse side of this form and return. Don't forget to include your check with your first month's contribution.



Tear and return.