



Friends of St. John the Caregiver  
 P.O. Box 320  
 Mountlake Terrace, WA 98043  
 www.FSJC.org

**2008 Non-event Fund-raiser**  
**'Whoo-hoo! This is easy!'**

*I'm so glad I don't have to  
 serve on a committee.*

*I'm so pleased there's no bidding,  
 baking, walking or work involved in this.*

Here is my donation of:

\$50    \$100    \$250    \$500    \$1,000   Other \_\_\_\_\_

*(Please print)*

First name: \_\_\_\_\_ Last name: \_\_\_\_\_

My check (payable to "Friends of St. John the Caregiver") is enclosed.

I prefer using my:

VISA    MasterCard    Discover    American Express

Name on card: \_\_\_\_\_

Number: \_\_\_\_\_

Expiration date: \_\_\_\_\_ Verification code: \_\_\_\_\_

(The verification code is the three-digit number printed on the back of your card. It's located in the signature panel after the account number or the last four digits of your account number.)

**>>To donate on-line** using a credit card or PayPal account,  
 go to [www.FSJC.org](http://www.FSJC.org) and click on "Donate."<<

It's OK to include my name on a published list of donors.

I prefer to be listed as an "anonymous donor."

I ask FSJC members to please remember in their prayers:

\_\_\_\_\_

\_\_\_\_\_

**I want to join the Friends of St. John the Caregiver. Please enroll me as a member.** (See reverse side.)

*Friends of St. John the Caregiver is a 501(c)(3) organization.  
 Donations are tax deductible as provided by law.*

**Thank you and God bless you!**

**Please enroll me as a member of the  
 Friends of St. John the Caregiver**

*No membership dues! No meetings!  
 All we ask is that you pray for family caregivers  
 and those receiving care.*

Mrs.    Ms.    Miss    Mr.    Rev.    Sister    Brother    Dr.

*(Please print)*

First name: \_\_\_\_\_

Last name: \_\_\_\_\_

Street: \_\_\_\_\_

City: \_\_\_\_\_

State/Province: \_\_\_\_\_

ZIP/Postal Code: \_\_\_\_\_

Country: \_\_\_\_\_

E-mail: \_\_\_\_\_

E-mail me /  Mail me: The free quarterly newsletter

Mail me a free copy of "The Little Book of Caregiver Prayers"

I am a *(select all that apply)*:

Caregiver    Person receiving care

Person who assists caregivers and those receiving care

I ask fellow members to please remember in their prayers:

\_\_\_\_\_

\_\_\_\_\_

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*Donations greatly appreciated!*

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