

Sympathy



Primrose Pieta



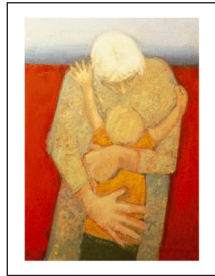
Morning Mystery



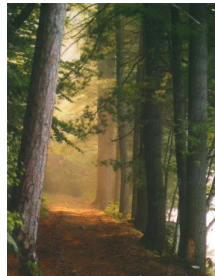
Mosaic of Christ



On Tiptoe



Grandmother



Annunciation



Pieta

Birthday



Flower Picker - Birthday



Water Jewel

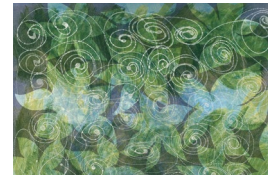
Blank



Vows



Flower Picker - Blank



Water Lily



Nature's Queen



Earthsong



St. Joseph

Thinking of You



Tulips



Wild Field



Earth

Road to Recovery



Spring Light

Get Well



Country Garden

Retirement



Sunset



Hammock

Sending a Card

The Sisters of St. Joseph of Carondelet, Albany Province offer memorial and tribute/greeting cards for numerous occasions.

A memorial gift provides a meaningful way to express your sympathy at the passing of a loved one. Gifts can also be made in honor of a living person or to commemorate a special event. Our cards can be used for all types of situations, including the birth of a child, birthdays, weddings, anniversaries, illness or any occasion when you want to let someone know you are thinking of them.

Cards will be sent to you upon request or can be picked up at the Provincial House. When you receive the cards, you will find a slip inside (see example below) that we ask you to return along with your contribution to the Office of Mission Advancement.

To order cards, please contact
Melissa Phillips at the Office
of Mission Advancement
518.783.3600 or
mphillips@csjalbany.org

Office of Mission Advancement
St. Joseph's Provincial House
385 Watervliet Shaker Road
Latham, NY 12110

Tribute Cards

Sisters of St. Joseph of Carondelet
Office of Mission Advancement

TRIBUTE DONATION FORM Enclosed is my/our gift of \$ _____ to support the Sisters of St. Joseph to be designated to (please check one): <input type="checkbox"/> CARE OF RETIRED SISTERS - Check payable to Sister M. Athanasia Gurry Trust Fund <input type="checkbox"/> GENERAL UNRESTRICTED - Check payable to Sisters of St. Joseph (Where most needed)
PLEASE PRINT ALL INFORMATION Donor's Name: _____ Address: _____ City: _____ State: _____ Zip: _____ E-mail Address: _____ Phone Number: _____
TRIBUTE INFORMATION: Given in the name of: In <input type="checkbox"/> Memory <input type="checkbox"/> Honor <input type="checkbox"/> Other Death Date: ___/___/___ Birthday ___/___/___ Anniversary ___/___/___ City: _____ ST: _____
OVER \$