



# GREEK ORTHODOX METROPOLIS OF CHICAGO

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## ΙΕΡΑ ΜΗΤΡΟΠΟΛΙΣ ΣΙΚΑΓΟΥ

Name: \_\_\_\_\_

Parish: \_\_\_\_\_

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

Phone Number: ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

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

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

State: \_\_\_\_\_ Zip: \_\_\_\_\_

### **My Annual Commitment**

Diamond: \$10,000+ | Platinum: \$5,000+  
Gold: \$2,500+ | Silver: \$1,000+ | Bronze: \$500+

With joy, I/we commit our gift of \$ \_\_\_\_\_ for \_\_\_\_\_ year(s).

Attached is my: Check [  ] Credit Card [  ]

Credit Card #: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ CVV: \_\_\_\_\_

Please make payable and send your tax-deductible gift to:

The Greek Orthodox Metropolis of Chicago  
PO Box 607  
Elk Grove Village IL 60009-0607

Thank you for your gift! We will send you a receipt.