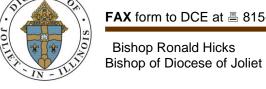
## **Department of Catechesis and Evangelization - Missions**

16555 Weber Road. Crest Hill, Illinois

**FAX** form to DCE at ≜ 815-846-7410 • இ 815-221-6256 • abuldak@dioceseofjoliet.org



Justin Reyes Director

Alex Buldak Office of Mission Lead

## **MISSIONARY COOPERATION PLAN**

*Name of Mission Organization:	
*Name of Organization Representative:	
Address:Pr	none:
City:Fax:	
State:Zip/Postal Code:	
Email:	
<b>★</b> The Diocesan donation check to your organization should be made payable in the name of:	
*Country:	
<b>★</b> Circle one : Archdiocese Diocese Vicariate Pro	efecture Religious Congregation Organization
Name of Bishop, Religious Superior, Director:	
Address:Co	ountry:
City:PI	none:
State: Fa	x:
Zip/Postal Code:Email:	
For what purpose are you seeking to make a mission appeal? Explain clearly and succinctly.	
Would your institute/diocese/organization be able to provi speakers to make parish appeals? Please check the app	
Spanish/English Polish/English Eng	glish/Polish/ Spanish English Only
*The application must be completed fully in order to be considered for the Missionary Co-Op Plan in the Diocese of Joliet, Illinois.	

All communications will be through email or fax. See numbers in our letterhead. Please do not return forms by mail.