## 2020 Operation Rice Bowl

Collect throughout the Great Fast – February 23 through April 5

Remit to the Diocese by April 17, 2020

**COLLECTION TRANSMITTAL FORM**

1. The amount being transmitted represents the collection taken up on ________________
   Date

2. Amount representing parish collection $ __________

3. Amount representing special individual gifts $ __________

4. Other $ __________

**Amount enclosed** $ __________

5. The enclosed check is: ____ partial payment or ____ final payment

6. If this collection was combined with other collections, please list here

   ___________________________________________________________________________

Submitted by Parish/Mission of: ____________________________________________

Address_______________________________________________________________

City___________________________State_______ Zip___________________

Direct inquiries to: Name: ________________________________________________

Title: ________________________________________________

Phone: _______________________________________________

**Distribution**

Make a copy of this transmittal form for your records and send in the original to our Romanian Catholic Diocese of Canton; Finance Office; 1121 44th St NE; Canton, OH 44714. Checks should be made payable to the Romanian Catholic Diocese of Canton.
2020

Holy Land Collection

Collect on April 19, 2020

Remit to the Diocese by April 24, 2020

COLLECTION TRANSMITTAL FORM

<p>| | |</p>
<table>
<thead>
<tr>
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</thead>
<tbody>
<tr>
<td>1. The amount being transmitted represents the collection taken up on</td>
<td>Date</td>
</tr>
<tr>
<td>2. Amount representing parish collection</td>
<td>$ __________</td>
</tr>
<tr>
<td>3. Amount representing special individual gifts</td>
<td>$ __________</td>
</tr>
<tr>
<td>4. Other _________</td>
<td>$ __________</td>
</tr>
<tr>
<td><strong>Amount enclosed</strong></td>
<td>$ __________</td>
</tr>
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</table>

Submitted by Parish/Mission of: ________________________________

Address_______________________________________________________

City___________________________State_______ Zip___________________

Direct inquiries to: Name: ________________________________

Title: ________________________________

Phone: ________________________________

_Distribution_

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Catholic Home Missions

Collect on April 26, 2020

Remit to the Diocese by May 8, 2020

COLLECTION TRANSMITTAL FORM

1. The amount being transmitted represents the collection taken up on ______________________________ Date

2. Amount representing parish collection $ ____________

3. Amount representing special individual gifts $ ____________

4. Other _______________ $ ____________

   Amount enclosed $ ____________

5. The enclosed check is: ____ partial payment or ____ final payment

6. If this collection was combined with other collections, please list here
________________________________________________________________________

Submitted by Parish/Mission of: _______________________________________

Address_______________________________________________________________

City___________________________State_______ Zip__________________

Direct inquiries to: Name: ____________________________________________

Title: ________________________________________________________________

Phone: ____________________________

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2020

Catholic Communications Campaign

Collect on May 24, 2020

Remit to the Diocese by June 5, 2020

COLLECTION TRANSMITTAL FORM

1. The amount being transmitted represents the collection taken up on ______________________________ Date

2. Amount representing parish collection $ ___________

3. Amount representing special individual gifts $ ___________

4. Other _____________________ $ ___________

Amount enclosed $ ___________

5. The enclosed check is: ____ partial payment or ____ final payment

6. If this collection was combined with other collections, please list here __________________________________________

Submitted by Parish/Mission of: __________________________________________________________

Address________________________________________________________

City___________________________State_______ Zip___________________

Direct inquiries to: Name: __________________________________________

Title: __________________________________________

Phone: __________________________________________

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**Peter’s Pence Collection**

Collect on June 28, 2020

Remit to the Diocese by July 10, 2020

COLLECTION TRANSMITTAL FORM

1. The amount being transmitted represents the collection taken up on ______________________________ Date

2. Amount representing parish collection $ __________

3. Amount representing special individual gifts $ __________

4. Other _______________ $ __________

   **Amount enclosed** $ __________

5. The enclosed check is: ____ partial payment or ____ final payment

6. If this collection was combined with other collections, please list here

________________________________________________________________________

Submitted by Parish/Mission of: ________________________________________________

Address________________________________________

City___________________________State_______ Zip___________________

Direct inquiries to: Name: ________________________________________________

                     Title: ________________________________________________

                     Phone: ________________________________________________

*Distribution*

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## 2020

**Aid to Churches in Central and Eastern Europe**

**Collect on August 16, 2020**

**Remit to the Diocese by August 28, 2020**

**COLLECTION TRANSMITTAL FORM**

1. The amount being transmitted represents the collection taken up on  
   ______________________________ Date  

2. Amount representing parish collection $ _______________

3. Amount representing special individual gifts $ _______________

4. Other ________________ $ _______________

   **Amount enclosed** $ _______________

5. The enclosed check is: ____ partial payment or ____ final payment

6. If this collection was combined with other collections, please list here
   __________________________________________________________________________

   Submitted by Parish/Mission of: _______________________________________

   Address_______________________________________________________________

   City___________________________State_______ Zip___________________

   Direct inquiries to: Name: _____________________________________________

   Title: _______________________________________________________________

   Phone: _______________________________________________________________

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2020

World Mission Appeal

Collect on October 18, 2020

Remit to the Diocese by October 30, 2020

COLLECTION TRANSMITTAL FORM

1. The amount being transmitted represents the collection taken up on ______________________________ Date

2. Amount representing parish collection $ __________

3. Amount representing special individual gifts $ __________

4. Other _____________________ $ __________

**Amount enclosed** $ __________

5. The enclosed check is: ____ partial payment or ____ final payment

6. If this collection was combined with other collections, please list here

________________________________________________________________________

Submitted by Parish/Mission of: ______________________________

Address________________________________________________________

City___________________________State_______ Zip___________________

Direct inquiries to: Name: ______________________________

Title: ______________________________

Phone: ______________________________

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2020

Romanian Martyred Bishops Collection

Collect on December 6, 2020

Remit to the Diocese by December 18, 2020

COLLECTION TRANSMITTAL FORM

1. The amount being transmitted represents the collection taken up on ________________
   Date

2. Amount representing parish collection $ _______________

3. Amount representing special individual gifts $ _______________

4. Other ________________ $ _______________

   Amount enclosed $ _______________

5. The enclosed check is: ____ partial payment or ____ final payment

6. If this collection was combined with other collections, please list here
   ______________________________________________________________________

Submitted by Parish/Mission of: ________________________________

Address__________________________________________________________

City___________________________State_______ Zip___________________

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