



# St. Faustina Parish Donor Form

Date of Donation \_\_\_\_\_

Donor / Company Name \_\_\_\_\_

Donor Address \_\_\_\_\_

City \_\_\_\_\_ Province \_\_\_\_\_ Postal Code \_\_\_\_\_

Contact Name \_\_\_\_\_

Telephone \_\_\_\_\_

E-mail \_\_\_\_\_ Total Donation \_\_\_\_\_

**Note: Please make your cheque payable to St. Faustina Parish**

I wish to direct this donation as follows:

|                              |        |       |
|------------------------------|--------|-------|
| Regular Sunday Donations     | Amount | _____ |
| New Church Building Fund     | Amount | _____ |
| Other (Please specify below) | Amount | _____ |

I wish to make this donation:

In Memory Of \_\_\_\_\_

In Honour Of \_\_\_\_\_

Other \_\_\_\_\_

Please send a tax receipt to:

Donor address  
\_\_\_\_\_

**Please send the completed Donor Form, along with your donation, to:**

St. Faustina Parish  
2571 Hwy. 174 (P.O. Box 99)  
Cumberland, ON K4C 1E5