

Contribution Form

Sisters of the Poor Handmaids of Jesus Christ

Yes, I wish to help continue offering the human face of God's love in our world today.

Please use my gift for the following:

Donor Information:

Name: _____

Address: _____

City: _____

State, Zip: _____

Email: _____

Phone: _____

Amount: \$ _____

Optional:

This gift is made (please print name):

In Need Of: _____

In Honor Of: _____

Please send notification of this gift to:

Name: _____

Address: _____

City, State: _____

Zip: _____

Please make your check payable to the Sisters of the Poor Handmaids of Jesus Christ

Thank you for your generous gift!