



Poor Handmaids Donation Form

*Thank you for helping the Poor Handmaids of Jesus Christ
Share God's love with many who are less fortunate.*

Name: _____

Address: _____ Apt: _____

City: _____ State: _____ Zip: _____

Email: _____

Phone: _____

I authorize the PHJC Development Office to charge \$_____ to my

Check # _____ VISA Mastercard

Name (as printed on card): _____

Card No: _____ Expiration Date: _____

Signature: _____ Date: _____

This gift is given *in honor* *in memory* *on the special occasion*
of _____

Please direct towards:

Sisters' Retirement Urgent Needs Catherine Kasper Home
 Other _____

Please send this form to: Development Office
Poor Handmaids of Jesus Christ
P.O. Box 1
Donaldson, IN 46513-0001

You can also donate online at <http://www.poorhandmaids.org>