

Please print or type. Once complete, please return this form to the Parish Office. Contact us if you have questions or need assistance in completing this form.

## Donation

Please accept this one-time donation of \$ \_\_\_\_\_

### Donor Information

Name \_\_\_\_\_

Address _____		City _____	Province _____	Postal Code _____
Telephone (Home) _____	Telephone (Other) _____	Email _____		

### Donation Information

Donation made by

Cheque (payable to Corpus Christi Parish)

Credit Card (complete section below)

Please mail donation, along with this form, to:

Corpus Christi Parish  
664 Red River Road, Thunder Bay, ON P7B 1H8

or, fax this form to us, at 807 345-0740.

Please charge my

Visa

MasterCard

Name on Card \_\_\_\_\_

Expiry Date (mm/yyyy)  
/

Card Number \_\_\_\_\_

CSC Number\*

\* 3 digit number on back of card

### Type of Donation

General Donation

Building & Maintenance

Area of Greatest Need

In Memory of

In Honour of

Ministry/ Program (specify)

### Tax Receipt Information

We issue tax receipts for all donations we receive. The receipt will be mailed in February to the donor named above.

# Thank You for Supporting Us