

## **RELIGIOUS SOCIETY OF FRIENDS**

Yes! I want to make a donation to Providence Friends Meeting!

First Name		Middle Initial	Last Name	
Address				
Address (2)				
City		State	State Zip/Postal Code	
Country				
Daytime Telephone				
Evening Telephone				
Email Address		Yes! Please po	ut me on the Meeting	g email communication list.
☐ Enclosed plea	se find my ch	neck in the amount of \$	U.S	. Currency
Charge my:	Visa	Mastercard	Discover	☐ American Express
Card number				
Expiration Date			CVV Code	
Signature				
☐ I/We work for a	company with	a Matching Gifts Prograr	m. This gift will be m	atched by
Company name	е			
Mail your contribution to:		Providence Friends Meeting ATTN: Treasurer P.O. Box 412		

Lima, PA 19037 610.566.1308