

Charitable Donations Form

Prince Edward Island

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Parish Council _____

<u>Organization</u>	<u>Amount</u>
Televised Masses	_____
Catholic Family Services	_____
Right to Life	_____
Birthright	_____
Foster Parents Plan	_____
St. Vincent De Paul Society	_____
Queen Elizabeth Hospital	_____
IWK	_____
Prince County Hospital	_____
Other Hospital (Please specify)	_____
Hospice PEI	_____
Upper Room Angels	_____
PEI Girls Bursary	_____
Other (please specify)	_____
_____	_____
_____	_____
_____	_____