

PHILOPTOCHOS

GREEK ORTHODOX METROPOLIS OF SAN FRANCISCO



Kids 'n' Cancer - 2019

Church Name:

Chapter Name & #

Address:

City/State/Zip:

Chapter President:

Telephone:

E-mail:

Chapter Treasurer:

Telephone:

E-mail:

Your commitment is: \$500.00 or more / Due: No later than June 1st each year

Check#: _____ Amount: \$ _____ Date issued: _____

- **Make check payable to: Metropolis of SF Philoptochos**
- **In Memo add: Kids 'n' Cancer & Chapter Number**
- **Please make separate checks for each commitment**
- **Two signatures are required on all checks**
- **Please do NOT staple or tape checks**
- **Send checks to:**
Metropolis of San Francisco Philoptochos
P.O. Box 230516
Encinitas, CA 92023

We appreciate and thank you for your cooperation in assisting us to keep our records current.
If you have any questions, please call the Metropolis Office.