

PHILOPTOCHOS

GREEK ORTHODOX METROPOLIS OF SAN FRANCISCO



Kids 'n' Cancer - 2020

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 9954
Rancho Santa Fe, CA 92067**

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.