

# PHILOPTOCHOS

GREEK ORTHODOX METROPOLIS OF SAN FRANCISCO



## Social Services – 2020

Church Name:

Chapter Name & #:

Address:

City/State/Zip:

Chapter President:

Telephone:

E-mail:

Chapter Treasurer:

Telephone:

E-mail:

Commitment is: \$500.00 or more / Due: March 31<sup>st</sup> of each year

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

- **Make check payable to: Metropolis of SF Philoptochos**
- **In Memo add: Social Services & 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.