



**CATHOLIC CHARITIES OF THE DIOCESE OF HARRISBURG
DONATION FORM**

Name _____

Address _____

City, ST Zip _____

Phone _____ **Email** _____

Amount \$1000 ___ \$500 ___ \$250 ___ \$100 ___ \$50 ___ Other \$ _____

Please designate my contribution as follows:

- _____ **Wherever the need is greatest**
- _____ **Adoption**
- _____ **Foster Care**
- _____ **Counseling Services**
- _____ **Evergreen House**
- _____ **Hope House**
- _____ **Interfaith Shelter for Homeless Families**
- _____ **Lourdeshouse**
- _____ **Heart of Mary Pregnancy Support Services (York, PA)**
- _____ **Immigration & Refugee Services**
- _____ **Paradise School (Abbottstown, PA)**

Please send your completed form along with your check (payable to Catholic Charities) to:

**Catholic Charities
4800 Union Deposit Rd.
Harrisburg, PA 17111**

**For more information, contact Christopher Meehan, Catholic Charities Director of Development,
at 717-657-4804 or cmeehan@hbgiocese.org**