

***The Friends of Old Saint Thomas
Donor Contribution Program***

Print this page and send the form with your payment to:

**The Friends of Old Saint Thomas
P.O. Box 19
Chester Heights, PA 19017**

Enclosed is my donation of \$_____ to the Friends of Old Saint Thomas.

Please send receipt to donor:

Name: _____

Address: _____

_____ **Zip:** _____

Phone: _____

Today's Date: _____