



Dear Father,

Please accept my donation of \$ \_\_\_\_\_ for your Franciscan Milk Fund for the little children of the missions. Please pray also for my intentions.

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Please send this form and your offering to the address below. Thank you.

Make check payable to Franciscan Mission Associates. Please be sure to complete all information.  
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