

# Jamaican Self-Help

P.O. Box 1992  
Peterborough, On  
K9J 7X7  
Tel: (705) 743-1671  
Fax: (705) 743-4020  
BN:897337150RR0001

## Monthly Giving Plan:

Please accept my monthly donations to JSH programme:

\$10     \$15     \$25     \$ 50     Other: \$ \_\_\_\_\_

My post dated cheques are enclosed

or

Please charge my credit card every month :     Visa     MC     Amex

Card#: \_\_\_\_\_

Expiry Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Please fill in mailing information for tax receipt purposes.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

I understand that payments will continue automatically each month until I notify JSH of any change.

Our guarantee: You may change or cancel your monthly donation at any time by contacting JSH.

An official tax receipt will be issued at the end of the year.

Thank you