Text

Description automatically generated with low confidence

**“Loose” Cash Donations**

|  |  |
| --- | --- |
| Parish Name |  |
| Parish Number |  |
| Parish Address |  |
| City/Zip Code |  |
| Phone Number |  |
| Parish Contact |  |

|  |  |  |
| --- | --- | --- |
| Denomination | Quantity | Total Cash |
| Coins: | -------------------------------à | $ |
| $1 Bills |  | $ |
| $5 Bills |  | $ |
| $10 Bills |  | $ |
| $20 Bills |  | $ |
| $50 Bills |  | $ |
| $100 Bills |  | $ |
| Grand Total Cash | -------------------------------à | $ |

|  |  |
| --- | --- |
| Parish Employee Signature |  |
| Parish Employee Signature |  |
| Parish Check Date and Check Number | / /2023 ------ Check # |

● Deposit cash into parish bank account and issue a check for the same amount made payable to: **Archbishop’s Catholic Appeal**.

● Attach the signed parish check to this form.

● Return the completed form and the signed parish check to the Archbishop’s Catholic Appeal Office by using the 10” x 13” business-reply envelope that was included in your parish kit. Thank you.

***DON’T FORGET TO ATTACH A SIGNED PARISH CHECK. DO NOT MAIL CASH***

**Questions? Please contact the Donor Relations Department at (303) 867-0614**.