

I want to help to bring lasting hope!

Here is my Gift.

I understand that my donation will help supply practical support and non-judgmental care to those affected by an unplanned pregnancy.

My Gift of \$ _____

Please make cheque payable to:
Pregnancy Care Centre Society of Kamloops
Mail to: 429 Tranquille Road,
Kamloops, BC V2B 3G9

(A tax receipt will be issued for all donations over \$10.00)
Charity number 85614 5594 RR0001

Please fill out so we can send you a tax receipt

Name (Please print)

Address _____

City _____

Prov. _____ PC _____

Phone _____

E-mail _____

I do not want to receive any further communications.



Pregnancy
Care Centre

*Thank
You!*

*It's not how much we give, but
how much love we put into giving.*

MOTHER TERESA.

WEB