

BUDDHA JOYFUL DAY DONATION FORM

Thank you so much for your support! Your donation is tax deductible to the full extent of US law.

Name for tax receipt: _____

Address: _____

Telephone: _____ Email: _____

You may donate any amount in one or more categories of your choice & provide us by August 11 with the names for dedication (both living and deceased).

Donation items are summarized as follows:

- 1) \$ _____ Meal offering
- 2) \$ _____ Tong Chu
- 3) \$ _____ Fire Ceremony
- 4) \$ _____ Releasing Animals
- 5) \$ _____ E-lamps
- 6) \$ _____ Any Projects

Please Write Total Amount Here \$ _____

HOW TO DONATE

- WRITE A CHECK PAYABLE TO PTC & FILL OUT THIS FORM.

Please write "Buddha Joyful Day" on the check memo line.

Mail your check and completed form to: **PTC Monastery, Attn: Office,
245 Sheafe Road, Wappingers Falls, NY 12590.**

- DONATE ONLINE (VIA PAYPAL) at <https://palpungny.org/support-offerings/supportpalpung-thubten-choling/>

PayPal membership not required, you can use any major credit card.

- CREDIT CARD.

We accept VISA or MasterCard.

You can mail this form to the above **PTC address**

OR you can fax this form to (845) 297-5761. Please fill out below.

For security purposes, do not email your credit card number.

CREDIT CARD

- A one-time charge of \$ _____ PLUS (if installment plan is applicable):
- Installment plan : _____ # of monthly charges of \$ _____ each month
(For a Total Amount of \$ _____ ; installment payments should add up to the
TOTAL AMOUNT ABOVE)

*For credit card installment plan, please put increments of at least \$100 per monthly payment.

Card Holder's Name: _____
(Please write name exactly as it appears on the card)

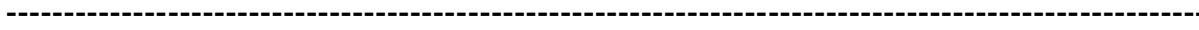
Card Number: _____ / _____ / _____ / _____

Card Holder's Signature _____

Today's Date: _____ / _____ / _____ (month) (date) (year)

Card Expiry Date: _____ / _____ (month) (year)

Security Code: _____



Names for dedication: (please ensure receipt by PTC before August 11)

Names for Deceased:

- | | |
|-----------|-----------|
| 1. _____ | 2. _____ |
| 3. _____ | 4. _____ |
| 5. _____ | 6. _____ |
| 7. _____ | 8. _____ |
| 9. _____ | 10. _____ |
| 11. _____ | 12. _____ |

Names for Living:

Sponsor _____

- | | |
|-----------|-----------|
| 1. _____ | 2. _____ |
| 3. _____ | 4. _____ |
| 5. _____ | 6. _____ |
| 7. _____ | 8. _____ |
| 9. _____ | 10. _____ |
| 11. _____ | 12. _____ |