

**MISSIONARY COOPERATIVE PLAN**

**OFFICE OF DIOCESAN AND INTERNATIONAL MISSIONS  
DIOCESE OF ERIE**

**Check Remittance Form**

Please make checks payable to: "The Diocese of Erie," and send with this form to:

**Office of Diocesan and International Missions**

Diocese of Erie  
429 East Grandview Boulevard  
Erie, PA 16504

Parish \_\_\_\_\_

Parish Address \_\_\_\_\_

Pastor \_\_\_\_\_

This appeal was made for (name of group) \_\_\_\_\_

Amount of Check \_\_\_\_\_

Check Number \_\_\_\_\_

Date of Check \_\_\_\_\_

Your comments are appreciated:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**YOUR PROMPT REMITTANCE WOULD BE GREATLY APPRECIATED.  
PLEASE RETURN THIS FORM WITH THE CHECK. THANK YOU.**