

**CHURCH OF THE NATIVITY OF THE BLESSED VIRGIN MARY**



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**CHURCH OF THE STS. JACQUES CHASTAN & LAURENT IMBERT**

REFERENCE NO.: \_\_\_\_\_

**PROJECT KASIH - WELFARE FORM**

**STORY (APPLICANT)**

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**YOUR URGENT REQUIREMENTS (APPLICANT)**

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(APPLICANT SIGNATURE)

**ESTIMATED AMOUNT (OFFICE)**

**WHY?**

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AMOUNT: \_\_\_\_\_

MONTHS: \_\_\_\_\_

TOTAL: \_\_\_\_\_

\_\_\_\_\_  
(SIGNATURE)  
PARISH PRIEST/ ASST. PARISH PRIEST