

# Malvern Cemetery Company



First name:

Last name:

Street address:

City:

Province

Postal code:

E-mail address:

Phone:

Donation amount:

\$10

\$25

\$50

Other

Family members buried at Malvern:

Please return this form to:

**MALVERN CEMETERY COMPANY**  
**P.O. Box 306, succ Lennoxville**  
**Sherbrooke, QC J1M 1Z5**

A tax receipt will be mailed be to you for your donation.

**Thank you very much for your support!**