

## **Donation Form**

Date:		
Name(s):		
Address:		
Phones:	(res.)	(bus.
Email:		
Please record my donation as follow	s:	
☐ Ho'onko	☐ Obon	
☐ Spring Higan	☐ Autumn Higan	
☐ Gotan-E	☐ Eitaikyo	
☐ In memory of:		
Other:		
Amount enclosed:		

Please make your check payable to HHHB and mail to or drop off at the temple office:

Honpa Hongwanji Hawaii Betsuin 1727 Pali Highway Honolulu, HI 96813

Thank you for your support of the Hawaii Betsuin!

(808) 536-7044 • office@hawaiibetsuin.org