

12月25日聖誕節當天晚上6点在常青公寓免費發放食物,需要义工和您的爱心食物



Victoria Chi-Lough With Best Wishes, [Signature]



我認識 Victoria Chi-Lough 已經很多年了。她 1982 年來美國自費留學,她出生在朝鮮戰場上,她有一個驚人的人生創業故事,以後有機會我們會和讀者分享。

12月11日,Victoria 和她的先生一起開車 4 小時到了報社,裝扮成聖誕老人的 Lough 先生,祝福伊利華報蒸蒸日上,Victoria 再三表示伊利華報是一份華人喜愛的報紙。

Victoria Chi-Lough 夫婦為華報送上祝福後,這位聖誕老人又為 Kitty Lee 送上了生日祝福,第二天他倆還到了亞洲商場為業主和顧客送上了祝福,同時他們也去了黃唯律師樓祝福大家聖誕快樂新年快樂和身體健康!

這次 Victoria 來克里夫蘭還有另外一個使命,她創辦的 PAN FAMILY CENTER 要為克里夫蘭的華人社區在 12 月 25 日聖誕節那天免費送食物,她希望那天有更多的人和他們一起服務社區,以下有二封表格請您填寫:一份是義務工表格,一份是捐食物的價格。

Victoria 有一個夢想 "GOD'S WORK SERVE EACH OTHER."

ER,她希望今年您也能加入她的行列。

Victoria Chi-Lough 創辦的 PAN FAMILY CENTER for Women and Children THE KEY TO THE FUTURE

All sections of preventive medicine, Department of internal medicine and urgent care. Free clinic for needy women and children, Job training program, Independent living support groups for foster parents and foster children, single mothers, doctors on wheels clinics. Attorneys on wheels legal services. Domestic abuse shelter emergency services and homes for children and family activities. we are as needed.

她創辦的協會的宗旨與目的是:

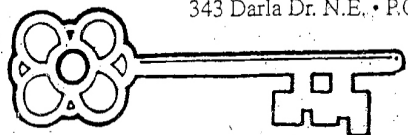
提供預防醫學,內科和緊急護理部門,為貧困婦女和兒童義診。職業培訓計劃,支持協助獨立生活的養父母和養子女和單身母親。提供汽車醫生診所,律師法律服務,家庭暴力庇護所和家庭緊急問題服務,協會專門為婦女和兒童服務。

聯繫電話: 740-763-3681



Pan Family Center for Women & Children

343 Darla Dr. N.E. • P.O. Box 718 • Newark, OH • 43055 • (614) 763-3681



The Key to the Future

Donor Form

Thank you for your donation to Pan Family Center. We are a community resource as a charitable organization as federal government regarded as tax deduction for donor. We are required to keep records of donations. Please help us by filling out this form.

Name, Address, City, State, Zip, E-mail address, Phone number, Cell Phone number

If this donation is made on behalf of an organization, company or person. Please let us acknowledge them.

Name of the organization, or company or person, Address, City, State, Zip, E-mail address, Phone number, Cell Phone number

Donor, please, Assign your own value to the donated items Donation items or cash

Dollar value \$

Donor signature

No goods or services were provided in consideration for this donation. Please retain this form for your tax records. Thank you

Free Clinic for Women and Children Support Groups for Foster Parents, Foster Children, Single Mothers. Job Training Program, Independent Living Program, and Family activities. Doctors on Wheels Program's

Please Return To:

VOLUNTEER APPLICATION

\* Key To The Future \*

NAME: First, Middle Initial, LAST, Date

Home Address: Street, City, State, Zip

HOME PHONE, WORK PHONE, OCCUPATION

WORK ADDRESS

INTEREST, SKILLS, HOBBIES

AREAS OF INTEREST: ADVOCACY, HOUSE TASKS, GROUP FACILITATING, WORK WITH KIDS, TRANSPORTATION, OFFICE WORK, FUNDRAISING, PUBLIC SPEAKING, OTHER

WRITE A BRIEF BIOGRAPHICAL SKETCH OF YOURSELF

DAYS AVAILABLE, TIME AVAILABLE, REFERENCES: 1. NAME, PHONE; 2.; 3.

Signature