



# The Society for the Propagation of the Faith

## Request for an Annuity Quotation

Please send me a personalized annuity package

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Province \_\_\_\_\_ Postal Code \_\_\_\_\_

Telephone \_\_\_\_\_ E-mail \_\_\_\_\_

Date of Birth \_\_\_\_\_

I am requesting a quotation for ☐ a single life annuity  
☐ a joint last survivor annuity

I would like payments to be made ☐ monthly  
☐ quarterly  
☐ semi-annually  
☐ annually

If requesting a join life survivor annuity, please provide:

Name of second annuitant \_\_\_\_\_ Date of Birth \_\_\_\_\_

Send to:

The Society for the Propagation of the Faith

2219 Kennedy Road

Toronto, ON M1T 3G5

Fax: 416-699-9019

e-mail: [missions@missionsocieties.ca](mailto:missions@missionsocieties.ca)

We are committed to handling any personal data that you give us in a respectful and lawful manner. Names and address of our benefactors will not be shared or sold to any organization but will be used for our internal purpose only.