



佛光山三寶寺

啟建孝親報恩清明法會通啟

各位護法信徒：阿彌陀佛！

一年一度的清明佳節即將來臨，為了讓大家慎終追遠、報答親恩，本寺特於國曆4月8日星期日，啟建『孝親報恩清明法會』，禮拜《慈悲三昧水懺》一永日；以此功德，迴向現生父母，延年益壽；過往先靈，蓮品增上。屆時歡迎闔府回寺，共沐良因、同霑法益。

肅此 順頌

忠義傳家

佛光山三寶寺 謹啟

法會時間：4月8日星期日 10:00am~5:00pm

- 功德項目：
1. 超薦大牌位
 2. 超薦小牌位
 3. 隨喜牌
 4. 供齋、供花果

地址：1750 Van Ness Ave, San Francisco, CA 94109

電話：415-776-6538

傳真：415-776-6954

網址：www.sanbaotemple.org

Email: sanbaotemple.sf@gmail.com

《清明超薦功德登記表》

請以正楷完整填寫登記表，以便作業。支票抬頭請開 A.B.C.S.

編號

No.

聯絡人：		聯絡電話：()	
地 址：		Email：	
稱謂 <small>(陽上稱呼亡者)</small>	亡者姓名	陽上姓名	功德金
<input type="checkbox"/> 現金 <input type="checkbox"/> 支票 CK# _____ 共計：\$ _____ 經手人 _____ 日期： 月/ 日/ 年			

《清明供齋、供花果功德登記表》

字跡工整以便作業。支票抬頭請開 A.B.C.S.

聯絡人：		聯絡電話：()			
地 址：					
功德芳名	功德項目	功德金	功德芳名	功德項目	功德金
<input type="checkbox"/> 現金 <input type="checkbox"/> 支票 CK# _____ 共計：\$ _____ 經手人 _____ 日期： 月/ 日/ 年					



American Buddhist Cultural Society

QING-MING DHARMA-ASSEMBLY OF FILIAL PIETY & GRATITUDE

Dearest Dharma-protectors and Devotees: Amitabha Buddha!

According to Chinese tradition, mid-spring is a time for us to repay the kindness of both our ancestors and departed friends. American Buddhist Cultural Society will conduct the *Qing-Ming Dharma-assembly of Filial Piety & Gratitude* on Sunday, **April 8th from 10:00am ~ 5:00pm**, performing the *Water Repentance*. Meritorious virtues will be dedicated towards the blessing and longevity of our present-life-parents and advancement through the lotus-grades for those who have departed. You and your family are invited to participate in this event, together bathing in benevolent causes.

A Family Legacy of Loyalty and Honor

American Buddhist Cultural Society

TIME: Sunday, April 8th 10:00am ~ 5:00pm

DONATIONS:

- 1 Memorial Plaques:
 - Large Plaque
 - Small Plaque
 - Plaque List
2. Meal Offering
3. Fruit & Flower Offering

Address: 1750 Van Ness Ave, San Francisco, CA 94109

website: sanbaotemple.org

Tel: [415-776-6538](tel:415-776-6538)

Fax: 415-776-6954

Email: sanbaotemple.sf@gmail.com

《 Memorial Plaque Registration Form 》 Please PRINT CLEARLY. Checks can be made to A.B.C.S.		編號	
Contact Person :		Contact Number : ()	
Address :		Email:	
Relation (of Departed)	Name of Departed	Name of Living	Donation
<input type="checkbox"/> Cash <input type="checkbox"/> Check No. _____		Total : \$ _____	Processor : _____ Date : / /

《 Fruit & Flower or Meal Offering Registration Form 》

Please PRINT CLEARLY. Checks can be made to A.B.C.S.

Contact Person :			Contact Number : ()		
Offerer's Name	Offering Type	Donation	Offerer's Name	Offering Type	Donation
<input type="checkbox"/> Cash <input type="checkbox"/> Check No. _____			Total : \$ _____	Processor : _____	Date : / /