

ST. PETER'S PARISH CHURCH

*I/We pledge to contribute to the mission and ministry of
St. Peters Parish Church in the Year of our Lord 2012:*

A total of \$_____ to be paid as follows:

Weekly _____ Monthly _____ Quarterly _____

Other _____ or One payment by (date) _____

Signature _____ Date _____

Name(s) _____

Address _____

City _____ State _____ Zip _____

E-mail _____