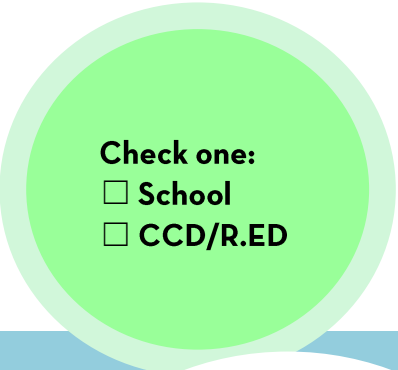


The enclosed gift(s) to support:



Extra Mile	\$ _____
Sharecare	\$ _____
Word Mission Month	\$ _____
Advent & Christmas	\$ _____
Lent & Easter	\$ _____
Emergency Relief	\$ _____
Special Project	\$ _____
TOTAL	\$ _____



_____ City

School/Parish Name

_____ Date

Contact Name

