



Holy Redeemer Catholic Church-1454 SW Mapp Road- Palm City, FL 34990
Request for Contribution Statement

Name: _____ **Date:** _____

Please check email or mailing address for preference:

Email: _____

Mailing Address*: _____

City: _____ **State:** _____ **Zip code:** _____

Phone Number: _____ **If Seasonal, please let us know:**

**Your Mailing Address is especially important for
non-registered but Contributing Parishioners**