

# *Request for Contribution Statement*

*Holy Redeemer Catholic Church  
P. O. Box 916  
Palm City, FL 34991*

*Date:* \_\_\_\_\_

*Name:* \_\_\_\_\_

*Mailing Address:* \_\_\_\_\_

*City:* \_\_\_\_\_ *State:* \_\_\_\_\_ *Zip code:* \_\_\_\_\_

*Phone Number:* ( \_\_\_\_\_ ) \_\_\_\_\_

*Cell Number:* ( \_\_\_\_\_ ) \_\_\_\_\_

*E-mail:* \_\_\_\_\_

*Please note:*

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

*Mail to:*

*Holy Redeemer Catholic Church  
P.O. Box 916  
Palm City, FL 34991*