

Request for Contribution Statement

Holy Redeemer Catholic Church

1454 SW Mapp Rd.

Palm City, FL 34990

772-286-4590

Date: _____

Name: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number: (_____) _____

Cell Phone: (_____) _____

Email: _____

***Please note: the mailing address is especially important for non-registered but contributing Parishioners.**

***Mail to Holy Redeemer at the address above or bring the form to the Parish office. Thank you.**