



St. Gabriel's Episcopal Church

2012 Stewardship Campaign Pledge Card

I/We pledge \$ _____ per

___ Week

___ Month

___ Quarterly

___ Year

in support of the mission and ministries of St. Gabriel's
Church, Marion.

Would you like envelopes? ___ Yes ___ No

Name: _____

Address: _____

Town: _____ Zip: _____

Phone: _____

Email: _____

Please return card to:

St. Gabriel's Church, P.O. Box 545, Marion, MA 02738

*St. Gabriel's Church extends our deep thanks to you for your
generosity and support.*