## ANNUAL FINANCIAL RENEWAL 2016-2017 Fiscal Year

Family Name:			
Family Address:			
Home Phone:	Cell Phones:		
Email Address:			
(Plea	se note that this ii	nformation is for Parish Offic	e only)
Please fill in your annua your choice for weekly			nd and identify
Davish Cumpart	Annual total	Weekly/Monthly/Yearly	<u>Remarks</u>
Parish Support	<del></del>		
Capital Improvement Permanent Endowmen	+		
Paraclete Fund		<del></del> -	
Annual Diocesan Appea	 al		
Other Donation (please			
The following space is for changes i leaving, new phone numbers or em			ns or mature children
Are you interested in direct deposite parishioners? You may sign up for box below to have the office contains.	direct deposit by o		
I/we wish to con	tinue using Autom	natic Contribution	
Yes, please call me with details for setting up Automatic Contribution or Online Giving			
We will be using On-Line Giving			