



MAY YOUR
GLORY
 shine



A CAMPAIGN FOR ST. LAURENCE

**Thank you for your gift/pledge to the three-year
 "May Your Glory Shine" Campaign.**

Total Gift/Pledge \$ _____

Initial Payment Enclosed \$ _____

Remaining Balance \$ _____

Remaining Balance will be divided equally by the timing indicated below

Timing of Payments:

- Monthly
 Quarterly
 Semi-Annually
 Annually
 Other _____

Please accept my gift in the following form (please select one):

- Check** make check payable to: *St. Laurence Catholic Church*
 • **Memo Line** of check *May Your Glory Shine Campaign*
- Gift of Stock** for information, Parish Business Office (281) 980-9812
- I/We wish to use automatic withdrawals from my/our (checking/savings) account OR automatic credit card payments
(Use your Faith Direct account or enroll at www.faithdirect.net, with parish code TX460)

Please Print Clearly

Name _____ Env. # _____

Address _____

City _____ Zip _____

Phone _____ Email _____

My Company, _____
will match my gift to the campaign