St. John's United Methodist Church Gifts and Memorials

Donor Name			Phone			
Address						
	Street		City	State	Zip	
Amount of Gift \$		Cash	Check	Stock	Other	
(Deta	ails of Stock or Othe	r)	
Gift is:	() In Honor Of					
Full Name (s)					
Send NO	FICE Card to:					
Street				·		
City			State	Zip		
*******	*******	******	******	*****	*****	
Designation of Gift:	Gen	eral Ministry of th	e Church	Specific	Purpose	
	Specific Pu	irpose Name				
If the gift is restricte after that purpose is				he general min	istry of the churc	
Signature of Donor						
Signature of Church	Representative Re	eceiving Gift				
Signature of Trustee	s Representative					

 $C:\label{locality} C:\label{locality} C:\label{locality} Documents\label{locality} In MEMORIAL\ FORM.doc\ /\ 3/26/2009$