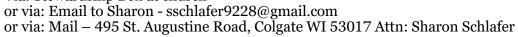
St. Paul's Erin Stewardship Commitment – 2025

Please return to Financial Secretary, Sharon Schlafer Via: Stewardship Box at church





Name:		
Address:		
City:	State:	Zip:
I plan to give \$ea	ach □ week □ month beginning	
for an annual total of \$	·	
I understand that this commitment ca	n be changed at any time by givin	ng notice to the church officer.
Signature:	D	ate:
Signature: Please retain a copy of this pledg	e for your records.	