



NAME: _____

“IN MEMORY OF” _____

CHECKS PAYABLE TO YOUR PARISH – WRITE GOSPEL OF LIFE ON MEMO LINE

ENCLOSED IS MY GIFT OF: \$25 _____ \$50 _____ \$100 _____ \$150 _____ \$500 _____ OTHER \$ _____

YES! COUNT ON ME TO HELP PROMOTE THE GOSPEL OF LIFE APPEAL AND
SAVE LIVES WITH MY TAX-DEDUCTIBLE GIFT!



DIOCESE OF PHOENIX

Gospel of Life Appeal



*“Do not be afraid! Always be brave!
Defend life!” St. John Paul II*