



Path of Grace United Methodist Church

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Thank You for supporting our mission and our ministries

Return this card the week of October 23rd by mail or in person to the church

Name: _____ Phone Number: _____

Address: _____

Email: _____

MY 2024 PLEDGE IS... \$ _____ per Year, \$ _____ per Quarter, \$ _____ per Month, OR \$ _____ per Week

☐ Check here if you are interested in paying your pledge electronically and we will provide more information.