2019 Mass Request Form

Please print or type all information

If the date you request is taken, you will be given the closest date available.

| | | | | Date/Time | |
|------------------|--------------------------------|--|-----------------------|---|----------|
| Intentio | n Name | Requeste | d By | *Preferred | |
| 1 | | | | | [] ST\ |
| | |] Birth Rem [] wedding | | | [] TRO |
| | | | | | [] STV |
| 2 | | | | | [] TRO |
| Type of Mass | ::[] Death Anniv [|] Birth Rem [] wedding | Anniv [] Health | | |
| 2 | | | | | [] STV |
| | | Birth Rem [] wedding | | | [] TRO |
| | | | | | |
| | | | | 11:00am. TRC at 9:00am or 1 | 12:00pm. |
| | | amily due to limited availal semember Masses are at 8 | | RC at 6:00pm. I celebrate Masses according | a to the |
| | | esday, & Wednesday. TRC I | | _ | g to the |
| | | the line blank and the mas | 55-00 P | 55.50 S | |
| | ********* | ******** | ******* | ***** | |
| Donor's Name: | | | | | |
| Donor Brianic. | | | | | |
| Address: | | | | | |
| Address. | 2 | | | | |
| | | | | | |
| | | | - 1841 <u>- 8-300</u> | 2 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 | |
| Phone Number: | | | | 7.5 To 10.00 | |
| | | ******* | | | |
| PLEASE RE | | | | IPENDS (\$10 per intent | tion) |
| | ST. VICTO | | TRANSFIGURAT | | |
| | РО ВО | | 94 McKRELI | | |
| | BAIRDFORI | D, PA 15006 | RUSSELLTON, | , PA 15076 | |
| Question | s? Please contact | the Parish Office: STV | at 724-265-2070 o | r TRC at 724-265-1030 | |
| | | Aasses will not be take | n over the phone. | | |
| If you need | ! a form, please ca ******* | ll and we will send you | one. Or print one | from the Parish website. | S. |
| FOR OFFICE USE | | | | | |
| Amount Enclosed: | | Da | te Received: | | |
| Cash or C | Check #: | Re | corded in Book: | | |