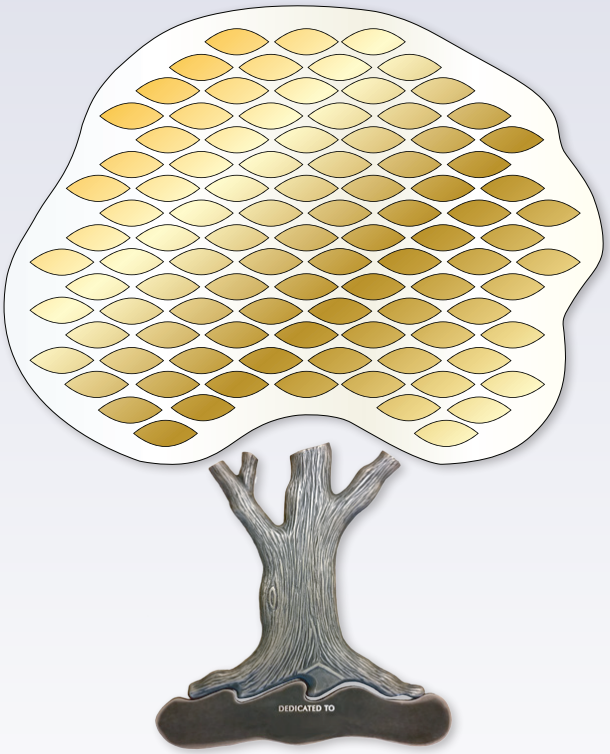
**Cemetery and Mausoleum**
136 Passaic Avenue, Summit, New Jersey 07901
Cemetery: 908.598.9426 | Mausoleum: 908.277.3741
*st-teresa.org/st-teresa-of-avila-cemetery-mausoleum/*

# Giving TREE




## YOUR **CONTRIBUTION** TOWARD THE **BEAUTIFICATION** OF OUR **CEMETERY** & **MAUSOLEUM**

*I want to do my part for this living memorial. Please accept my contribution to the beautification of our grounds.*

**$500 DONATION WILL INSCRIBE YOUR MESSAGE ON A LEAF**

*TEAR THIS SECTION*

**YOUR MESSAGE CAN INCLUDE UP TO FOUR LINES OF INSCRIPTION.**
*(LINE 2 WILL HAVE A LARGER FONT)*

1 ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐
2 ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐
3 ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐
4 ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

NAME:

ADDRESS:

CITY: STATE: ZIP:

PHONE:

- ☐ I AM ATTACHING A CHECK IN THE AMOUNT OF $500 FOR THE FULL AMOUNT OF MY DONATION FOR A GIVING TREE LEAF
- ☐ I WANT TO DONATE STOCKS OR SECURITIES - PLEASE CONTACT ME TO ARRANGE THE DONATION.
- ☐ I WILL USE PARISH GIVING TO CONTRIBUTE ELECTRONICALLY.
- ☐ I WOULD LIKE TO DONATE TOWARD THE BEAUTIFICATION PLAN, ENCLOSED IS THE FULL AMOUNT OF MY DONATION.

PLEASE CHARGE MY CREDIT CARD *(You may call the Parish Office if you prefer to deliver those details over the phone)*

CARD # EXPIRATION DATE

CREDIT CARD TYPE: ☐ VISA ☐ MASTERCARD ☐ AMEX SIGNATURE

NAME AS IT APPEARS ON CARD CVC CODE

*Return this order form to our office or mail to: St Teresa Mausoleum c/o 306 Morris Ave, Summit, NJ 07901*
Make your check made payable to St Teresa of Avila Mausoleum.