	FOR OFFICE USE ONLY:
	Scheduled
	Rescheduled
	Rescheduled
Date Received:	
Mass Requ	
St. Mary's Cat	holic Church
220 W. Ma	ain Street
Camden, <sup>-</sup>	TN 38320
Name of person Mass is being offered for (please print clea	arly):
value of person wass is being offered for (please print cle.	ыну).
Please check ✓ one of the following	
Repose of the soul	
☐ Intention of	
<b>□</b> Other	
	NI C
Date desired:	
Address Mass card is to be mailed:	
Your name and phone number:	
iou. name and phone namber.	

This form has been designed to make life a little easier for you. It can be filled out then either dropped into the offertory basket or mailed to the address above. Mass request can still be called in or sent via e-mail. Our e-mail address is *smchfhcatholic@gmail.com*. Should you have any questions please call the parish office @ 731-584-6459.

Amount Paid:

☐ My (minimum) offering of \$5.00 is enclosed