

CMA Donation Form

An excerpt of a letter from Bishop Murphy to the parishioners of St. Patrick Parish:

As we start to look ahead in anticipation of some summer days on this most beautiful part of God's earth, I would like to ask each and everyone of you to help me. This week or next or any day before you go on vacation, stop and ask yourself if you can give a little more to the CMA before you and your family go off on your holidays. If you have stopped giving, for whatever reason, think about this fact: no money from the CMA enriches anyone or adds to anyone's salaries or benefits who work in this Diocese beginning with your bishop on down to every other person who serves you. The CMA contributions go exclusively to the five areas of the Diocese that are so much more in need because today's needs are greater than yesterdays. So, even if it is only a small amount, that doesn't matter. What matters is the generous heart that makes a sacrifice to help others. And that sacrifice, however large or small, will multiply itself because of your goodness and your care.

So please let's make an end of the year, beginning of summer effort to give a little more, give a little extra, give something from your heart to the CMA before you go off on vacation. And may the God who watches over us watch over, protect you and your family during these summer months wherever you may be relaxing and being refreshed by the beauty of God's creation and the joyful fun of family and friends together

**St. Patrick's currently has received
\$85,339.09.00 in pledges from 388 families
toward our goal of \$130,000.00.**

If you can help, please do so. Contributions can be made using the form below and sending it to:

**Catholic Ministries Appeal
Diocese of Rockville Centre
P.O. Box 4000
Rockville Centre, NY 11571-4000.**

2010 Catholic Ministries Appeal Diocese of Rockville Centre **ONE FAITH, ONE HOPE, MANY GIFTS**

Please make your check payable to:
Catholic Ministries Appeal

Parish: _____

Name: _____

Address: _____

City, State, Zip: _____

Phone: _____ Donor Signature: _____ Date _____

E-mail Address _____

Pledge: \$ _____

Down Payment: \$ _____

Balance: \$ _____

Payment Plan:

Monthly

Quarterly

Annually

Other

SUPPORTING THE SERVICES OF THE

The Catholic Church
of Long Island 