SANCTUARY LAMP REQUEST



The Sanctuary Candle Burns for 2 weeks.

FOR:	
REQUESTED BY:	
CONTACT:	Phone #
DATE: (1ST CHOICE)	
(2ND CHOICE)	
Stípend: \$2	25.00

Make Checks Payable to St. John the Evangelist Church

OFFICE USE ONLY	
Date Received:	Time Received:
Amount Paid: \$	Cash Check #