

2020 MASS REQUEST FORM

City Center Grouping

Today's Date: _____

Person Requesting Mass: _____

Address: _____

Phone Number: _____

For Office Use Only:
Paid: <input type="checkbox"/>
Date Entered: _____

Check # _____ Amount _____ Cash _____

Date	Time	Intention	L	or	†	Requested by:
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
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_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

*Effective January 1, 1994 in the Diocese of Pittsburgh, the approved Mass stipend is \$10.00 for each Mass.