

Please make your tax deductible check to:
and return to:

Fellowship of John
FSRC (Foxwood Springs Residents' Council)
P.O. Box 701
Raymore, MO 64083

Amount of Gift \$ _____

Gift made by Name _____
Mailing Address _____
City/State/Zip _____

Name of person Memorialized or Honored _____
(please circle one) first last

Send notice to Name _____
Mailing Address _____
City/State/Zip _____

I wish to make regular gifts (check one) Monthly___ Quarterly___ Other___