

The Women's Resource Center
Invites you to our Annual Fundraising Dinner

Friday, September 5, 2013

Woodland Baptist Church, 280 Main Street in Keller Seating begins at 6:45 p.m. Dinner and Program 7:00 to 9:00 p.m.

An opportunity to make a financial gift will be extended

Dinner is complimentary (Sunday attire)

RSVP by August 27th.

Adults only please as seating is limited.

"The Lord tends his flock like a shepherd; He gathers the lambs in his arms and carries them close to his heart."

- Isaiah 40:11a (NLT)

Will you follow the Shephero's Heart?

| ☐ I would like to make reserv | ations for | _ person(s) to attend. | |
|-------------------------------|------------------------|-------------------------|-----------|
| (Please list the name and a | address for each gue | st on back.) | |
| ☐ I cannot attend but please | accept my one-time | gift of \$ | |
| ☐ I cannot attend but would | like to make a month | nly pledge of \$ for 12 | ! months. |
| ☐ Check included ! | ☐ Check to be maile | d later | |
| ☐ MC / Visa ☐ Di | scover 🗖 AmEx | | |
| Credit Card # | | Exp. Date | |
| Signature | | | |
| Name | | | |
| Address | | | |
| City, State, Zip | | | |
| Phone | E-mail | | |
| Please RSVP by August 15. A. | ll gifts are tax deduc | tible. | |

The Women's Resource Center

280 Main Street • Dayton, TN 37321 • www.prcresources.com • 800-338-8928

"He shall gather the lambs with his arms . . . "

| Name | | |
|---------|------|------|
| Address | | |
| | | |
| Name | | |
| Address | | |
| | | |
| Name | | |
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| Name | | |
| Address | | |



Your dinner has been reserved at the Women's Resource Center's Fundraising Banquet

Friday, September 5, 2013

Woodland Baptist Church, 280 Main Street in Keller

Seating begins at 6:45 p.m.

Dinner and Program 7:00 to 9:00 p.m.

(Sunday attire)

"We are His people and the sheep of His pasture."

- Psalm 100:3

Board of Directors

Marvin Keener, *President*Blake Singer, *Vice President*Marsha Young, *Founder*Arnold Butler, *Member*Gina Masten, *Member*Tiffany Marshall, *Member*Camille Ngande, *Executive Director*

Camilla Nganda Five

Camille Ngande, *Executive Director*Sherrie Lewis, *Abstinence Educator*Beth Duncan, *Director of Development*

Thank You

Tonight's event has been paid in full by several generous underwriters. Every donation given this evening will ensure our continued pro-life ministry of hope and compassion. Please give as the Lord leads. Your financial partnership provides an eternal investment for hundreds of people in your community.

Genter's Resources Center

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Women's Resource Center's

Annual Fundraising Dinner September 5, 2013



Why we are here

We exist to

- Promote and protect the sanctity of human life, from a Biblical view-point, especially life in the womb.
- Be a proactive voice and influence for life in our community with the ultimate goal of seeing abortion come to an end.
- Introduce our clients to Jesus Christ and proper avenues of discipleship.

The free services we provide include:

- Pregnancy Testing
- Advocacy & Support Services
- Childbirth Education
- Parenting Skills Class

- Limited Obstetrical Ultrasound
- Material Needs Assistance
- Moms Support Group
- Post Abortion Healing Workshop

Statistics

Abortion Vulnerable Clients 37 Ultrasounds performed 22 Volunteers 18 Students in Abstience Ed. 300

Our Sponsors

East County Pregnancy Care Clinic would especially like to thank the individuals and organizations that provided a substantial gift to underwrite tonight's event.

All-Weather Roofing Collier Heating and Air

Mark and Laura Davis Clark and Lucy Wallis

Maddison Catering Alfred M. Miller, III

Robinson Manufacturing Windrow Extermination

We are so grateful to all who donated underwriting funds to our 2010 Annual Fundraising Banquet. Also, thank you to Sonrise Community Church for providing the audio/visual staff and equipment.

Grogram

Welcome Michael Reed

Program Director
WRCO 156.8 FM

Invocation. Pastor Al Miller

Pastor, Meadowview Baptist

Dinner

Music Advice of James

What Faith Can Do by Kutless

Ministry UpdateJosh McClure

Executive Director

Guest Speaker Lisa Morgan

Speaker and Author

Lisa is an accomplished author and speaker with more than 40 books in print and a full calendar of speaking engagements thorught the year. Her pro-life testimony is an inspiration to those on the front lines nation wide.

Pledge Challenge Michael Reed

Music Advice of James

He Knows My Name by Tommy Walker

BenedictionBrandon Marshall

Senior Pastor, Faith Chapel

Pledge Envelope (Optional)

Follow the hephero's Heart
Annual Fundraising Dinner

The Women's Resource Center 280 Main Street Dayton, TN 37321

I want to follow the Shephero's Heart

| Yes! I want to share in this life-affirming min | nistry. |
|-------------------------------------------------|------------------------------------------|
| □ One Time Gift: □ \$1,000 □ \$750 □ | \$500 \$ \$250 \$ Other \$ |
| ☐ Monthly Pledge: ☐ \$250 ☐ \$100 ☐ | \$75 \$ \$50 \$ Other \$ |
| □ Leadership Gift: □ \$5,000 □ \$10,000 | □ \$25,000 □ \$ 50,000 |
| ☐ I am considering a gift other than those | suggested. Please contact me. |
| ☐ Please contact me about volunteering. | |
| Thank you for all you mean to The Women's | 's Resource Center. |
| | |
| | |
| ☐ Check included ☐ Check to be mailed later | MC / Visa □ Discover □ AmEx |
| Credit Card # | Exp. Date/ |
| Signature | |
| Name | |
| Address | |
| City, State, Zip | |
| | _ E-mail |
| All gifts are tax deductible. | |

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I want to follow the hephero's Heart

| I/we would like to support this life-affirming ministry. |
|-------------------------------------------------------------------------------|
| ☐ One Time Gift: ☐ \$1,000 ☐ \$750 ☐ \$500 ☐ \$250 ☐ Other \$ |
| ☐ Monthly Pledge: ☐ \$250 ☐ \$100 ☐ \$75 ☐ \$50 ☐ Other \$ |
| □ Leadership Gift: □ \$15,000 □ \$10,000 □ \$5,000 □ Other \$ |
| ☐ I am considering another gift, please contact me. |
| ☐ Please contact me about volunteering. Thank you for your generous support! |

The Women's Resource Center

8890 Market Street • Keller, MO 55890 • Phone 554-339-8972 • Fax 554-339-8970

| Pledge Card Back (Option Check included Check to be ma | ☐ MasterCard/V | isa |
|--------------------------------------------------------|----------------|-----|
| Credit Card # | Exp. Date | _/ |
| Signature | | |
| Name | | |
| Address | | |
| City | | |
| Phone | | |
| (All gifts are tax deductible) | | |
| Comments: | | |
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