

### Pregnancy Care Center

555 Main Street · Townsville, ST 01234 800-338-8928 · prcresources.com

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#### Christmas Card - Inside

Mason	Benjamin	Joshua	Oliver	Mason
Emma	Abigail	Zoe	Evelyn	Emma
Liam	William	Nathan	Samuel	Liam
Olivia	Madison	Zoey	Lucy	Olivia
Ethan	Ryan	Caleb	Evan	Ethan
Sophia	Avery	Sofia	Layla	Sophia
Noah	James	Andrew	Max	Noah
Ava	Charlotte	Aubrey	Lillian	Ava
Jacob	Matthew	Luke	Gavin	Jacob
Isabella	Amelia	Natalie	Samantha	Isabella
Jack	Michael	Daniel	Connor	Jack
Ella	Addison	Elizabeth	Leah	Ella
Logan	Alexander	Dylan	Landon	Logan
Mia	Harper	Brooklyn	Ellie	Mia
Aiden	Owen	Gabriel	Tyler	Aiden
Chloe	Hannah	Claire	Alexis	Chloe
Jackson	Jayden	Carter	Eli	Jackson
Emily	Grace	Anna	Stella	Emily
Lucas	Elijah	Henry	Hunter	Lucas
Lily	Sophie	Audrey	Victoria	Lily

Jesus was the one who demonstrated true love when He stepped down from heaven and entered into our world as a little baby. Because of His decision, we are blessed with the gift of eternal life. What a marvelous Christmas Gift!

Thank you for being the one who enabled us to share the love of Christ with our clients.

Through your participation, many of our clients were able to experience His hope.

# Merry Christmas!

from the Board and Staff of the Pregnancy Care Center

Each name represents a life saved by our growing ministry this year.

## Pregnancy Care Center

555 Main Street Townsville, ST 01234

**Resturn Service Requested** 



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## My Invalvement

I will support this ministry in the following ways. (Check all that apply)

My One Time Gift: to meet immediate needs.

	□ \$5,000 □ \$500			O r \$	PREGNANCY CARE CENTER  MATTHEW 123		
-	-			istry throughout the	year.		
More Opportunities: I I am considering another gift, please contact me. I I am considering volunteering, please contact me. I will commit to pray for this ministry.							
Name			+				
Address _			Ne				
City, State	, Zip						
Phone All gifts are		ble. Please f	0000	back of this card.			

He is the

## My Gift Options

☐ Check Included						
□ Automatic Monthly Giving: The easiest way to faithfully keep my commitment.  I want to transfer on the □ 15th or □ 30th of the month in the amount of \$ This authorization is the same as if I had personally signed a check and will remain in effect until I notify the ministry that I wish to change or terminate it. I have provided the necessary banking information to begin the transfer program by enclosing:  □ a donation check □ voided blank check □ credit card □ debit card						
Signature	Date					
☐ Credit/Debit Card: MasterCard/Visa/Discover/AmEx						
Credit Card #	Exp. Date /					
Signature	Sec. Code					
Comments:						
Comments:						

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#### A2 envelope (RSVP & Pledge)



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