# St. Timothy's Episcopal Church
# Intercessory Prayer Chain Request

**My Name:** _____

**Date of Confidential Prayer Request:** _____

**Prayer requested for** (First & Last Name):

_____

☐ I have obtained this person's permission to request intercessory prayer.

**Prayer Request** (please include a brief description of the condition or situation; use back for more space)

_____

_____

*The Intercessory Prayer Chain prays intensely for 7 days. If you would like us to pray for a longer time, please let us know.*

☐ Check here if you would like to be contacted by one of St. Timothy's clergy.
My phone number is: _____

Put your request in an envelope. Label it "Prayer Requests. Place it in the offering plate or take it to the office.

You may also contact us at: prayers@SaintTimothysDanville.org

Blessings,
Patti Farris 925-979-9043
Helen Coleman 925-831-1728