

STATEMENT
Favors granted through the intercession of
Sister Marie de Mandat-Grancey

Name _____

Address _____

Petition prayed for:

Describe manner of prayer (novena, group prayer, use of prayer card, etc.):

Results of petition:

Signed _____

Notary _____

Date _____

Submit to:

Sr. Marie de Mandat-Grancey Foundation
P.O. Box 275
Cold Spring Harbor, NY 11724