



FIVE STAR UNIT

FLORIDA CONFERENCE UNITED METHODIST WOMEN

- | | Date Completed |
|---|----------------|
| 1. Pledge to Mission, paid in full and increased from previous year | _____ |
| 2. Special Mission Recognition *
To: _____ | _____ |
| 3. Gift to Mission * (includes Love Offering)
To: _____ | _____ |
| 4. Gift in Memory *
For: _____ | _____ |
| 5. World Thank Offering | _____ |

*List additional on back of form

Note: Designated funds, as Call to Prayer, Brighter Future, UMCOR, Legacy, etc are not included in the five star criteria.

Unit Name _____

Treasurer _____

Address _____

City _____

Phone _____

E-mail _____

Date submitted _____
for calendar year _____

Please give this form to your district treasurer, by March 1 of current year.