## THE REMITTANCE FORM FOR ALL TREASURERS

Order No. (Please make sure that all orders h	ave a unique order no.)			
Local Unit:		District:		
Conference:		Period from:	To:	
Minnian Civing				Amount
Mission Giving 1. Pledge to Mission				Amount
2. Special Mission Recognition	1			
3. Gift to Mission	1			
4. Gift in Memory				
5. World Thank Offering				
				<u>^</u>
Total Mission Giving (Lines 1 thru 5):				\$
Supplementary Gifts				Amount
6. A Call to Prayer and Self-De	enial			
7. Designated Gifts			Amount	
A Brighter Future for Childre	en and Youth			
Assembly Offering				
Scarritt-Bennett Center				
World Communion Scholarship				
Magazine Fund				
	ddress		Amount	
Total from Supplementary G	ifts Details Form			\$
Subtotal Designated Gifts (line 7 only):				\$
8. Legacy Fund				
9. Bequest (please attach a copy of the will or excerpt of the will)				
10. Other Designated Gifts				
Total Supplementary Gifts (lines 6 thru 10):				\$
Total-total giving for this period (including Special Mission Recognition orders)				\$
Less SMRs (and other as applicable) remitted previously (Enter as a positive number.)				
Total remittance Check no.: TOTAL:			\$	
TREASURER:				
ADDRESS:				
PHONE:	FAX:	E-mail:		
DATE:				

