

Lutheran Women's Missionary League (ZONE TREASURER'S REMIT FORM)

DUE: 22ND OF EACH MONTH

DATE: _____

CHECK #: _____

Mission Education

(Includes Church Worker Study & Seminary Grants) \$ _____

Endowment Fund \$ _____

ZONE: _____

Treasurer: _____

Address: _____

Email: _____

Cell # _____

Mission Fund

Mites \$ _____

**Other \$ _____

(Includes Prayer Service, Rally Offering, LWML Sunday, Memorials & all other contributions towards the Mission Fund Goal.

**LIST BELOW, or on back, THE DETAILS FOR OTHER: (INCLUDE MEMORIAL INFORMATION, Name & local Congregation, etc.)

Operating Fund

Dues \$3.00/mbr \$ _____

Designated: \$ _____

TOTAL AMOUNT: \$ _____

MAKE CHECK PAYABLE TO:
LWML MO DISTRICT
Mail to: Rita Bryant
MO District Financial Secretary
8341 Overbrook Road
Leawood KS 66206
Cell #913-488-2855

Quarterly Money: **Make check payable to: LWML MO District.** Mail to: Rita Bryant (see address above)
Please use the form available at missourilwml.org (Lutheran Women's Quarterly Order Form)

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