

Lutheran Women's Missionary League

check #: _____ RECEIPT # _____

Mission Education

(Includes Church Worker _____
Study Grants, Seminary Grants)

Mission Fund

Mites..... _____
Other**..... _____
(Includes Prayer Service, Rally
Offering, LWML Sunday, Memorials
& all other contributions toward the
Mission Fund Goal)

Operating Fund

Dues @ \$3.00..... _____
Designated _____

Endowment Fund

Date: _____
Zone: _____
Treasurer: _____
Address: _____

Email: _____
Detail for Other** _____
** _____

TOTAL AMOUNT:
Make check to: LWML MO District
Mail to: Carol Riedel
MO District Financial Sec.
14251 East Pingleton Rd
Centralia, MO 65240

Quarterly Money

Make check to: LWML MO District
Mail to: Carol Riedel
14251 E Pingleton Rd
Centralia, MO 65240

Please use the form available @
missourilwml.org forms
Lutheran Womens Quarterly Order Form

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