

2015



Congregational Remittance Form

Northwestern Ohio Synod
Evangelical Lutheran Church in America

P.O. Box 981
Findlay, Ohio 45839

PHONE 419-423-3664 FAX 419-423-8801

Congregational Contact: _____

Phone Number (_____) _____ - _____

Congregational ID Number _____

Name of Congregation _____

Actual Location (city/town/village) _____

Mailing Address (street/box, post office, zip) _____

ALLOCATION OF GIFT

CURRENT REMITTANCE

YEAR-TO-DATE TOTAL

Mission Support (Statement of Intent) _____

World Hunger _____

LWR – Lutheran World Relief _____

Global Ministries _____

ELCA Disaster Response _____

Other (please specify): _____

MISSIONARIES (list name[s])

Totals

Please make your check payable to Northwestern Ohio Synod, ELCA. Note that this form and your check are sent to the P.O. Box number indicated above. This is not the same address which you normally use to send correspondence to the Bishop's office.

Signature _____ Date _____