

SHIPPING LETTER

Name of church/organization _____

Street address _____

City, _____ State, _____ Zip _____

PLEASE PHOTOCOPY AND SEND THIS LETTER TO:

**Interchurch Medical Assistance, Inc.
P.O. Box 429
New Windsor, MD 21776-0429**

From (name of project coordinator) _____

Telephone _____

This is to advise you that we have sent _____ (number of kits) to I.M.A. on (date sent) _____

via (name of shipping service) _____

Please designate this HFK for a member program of The United Methodist Church.