UNITED METHODIST WOMEN

THE REMITTANCE FORM

FOR ALL TREASURERS

Local Unit:		**District:**	
Conference:		**Period From:**	**To :**

MISSION GIVING	**TOTAL**
1. Pledge to Mission	
2. Special Mission Recognition	
3. Gift to Mission	
4. Gift in Memory	
5. World Thank Offering	
TOTAL MISSION GIVING (Lines 1 thru 5):	$ -

DESIGNATED GIFTS	**AMOUNT**	
6. A Call to Prayer and Self-Denial		
7. Supplementary Gifts		
A Brighter Future for Children and Youth		
Assembly Offering		
Scarritt-Bennett Center		
Crusade Scholarships		
Magazine Fund		
National, International, & UMCOR Projects (if additional pages are needed, please complete the Supplementary Gifts -- Details Form)		

NAME OF PROJECT	ADDRESS		
Total from additional page--Supplementary Gifts --Details Form			

SUBTOTAL SUPPLEMENTARY GIFTS (Line 7 only):	$ -
8. Bequest (Please attach a copy of the Will or excerpt of the Will.)	
9. Other Designated Gifts	
TOTAL DESIGNATED GIFTS (Lines 6 thru 9):	$ -

MEMO TOTAL - TOTAL GIVING FOR QUARTER (Including Special Mission Recognition Orders)	$ -
Less: SMRs (and other as applicable) remitted previously (Enter as a positive number)	

TOTAL REMITTANCE	Check #:		**TOTAL:**	$ -

Treasurer:	**Address:**
Phone:	**Fax:**
E-mail address:	**Date:**