UNITED METHODIST WOMEN

SPECIAL MISSION RECOGNITION

◆◆◆ SUMMARY OF ORDERS ◆◆◆

FOR CONFERENCE TREASURERS

Order #:	**Date:**	
Conference:	**Period From:**	**To:**

◆◆◆ DISTRICT ORDERS ATTACHED ◆◆◆

(List by name)

DISTRICT	**AMOUNT**
	$
Check #:	**TOTAL AMOUNT OF REMITTANCE:** **$**

THIS ORDER WAS: ☐ **FAXED** ☐ **PHONED** **DATE:**

☐ **MAILED** ☐ **E-MAILED TO UMWSMR@gbgm-umc.org** (Check as appropriate)

FOR WOMEN'S DIVISION USE ONLY:

Received:	**Amount:**
Conference Code:	