

Print as needed



Southwestern Minnesota Synod
Evangelical Lutheran Church in America
God's work. Our hands.

Remittance Form

Congregation Code No. _____

Congregation Name _____

Town/City _____

For month of _____ **2019**

REGULAR MISSION SUPPORT (Benevolence)\$ _____

ELCA World Hunger\$ _____

Missionary Sponsorship\$ _____

Name _____

Embrace God's Mission + Equip God's People

Funding Initiative\$ _____

Ministerial Excellence Fund\$ _____

Other Designated Gifts to:

_____\$ _____

_____\$ _____

_____\$ _____

_____\$ _____

Total of Check(s) _____\$ _____

Make checks payable to:
Southwestern Minnesota Synod, ELCA

Mail to:
Bookkeeper
Southwestern Minnesota Synod, ELCA
P.O. Box 499
Redwood Falls, MN 56283