



LUTHERAN WOMEN'S MISSIONARY LEAGUE - MICHIGAN DISTRICT

Remittance Form

Please make all checks payable to:
LUTHERAN WOMEN'S MISSIONARY LEAGUE

Date: _____

Mail together with this form to:

Church: _____

Carol Swenson
Financial Secretary
822 W Huron Ave
Vassar, MI 48768

City: _____

LWML Zone: _____

Total Remittance: \$_____

A receipt will be returned with another set of this form. Please enclose a stamped, self-addressed envelope. This saves mite money for mission work!

Check if from:

Fall Rally

Spring Rally

NAME, ADDRESS & PHONE OF REMITTER
(include email if available)

\$_____ MITES

\$_____ Special Gift or Offering*

\$_____ Lydia's Legacy*

*In memory of: _____

*In Honor of: _____

\$_____ Other _____

(District Financial Secretary)

RETURN WHITE AND YELLOW COPY WITH CHECK - THE YELLOW COPY WILL BE RETURNED FOR YOUR RECORDS