



District Remittance Form is required

Name of Zone or Society or Group _____	Date _____
Church and address _____	Check # _____
Mites for mission grants	\$ _____
Society Offering for District expenses	\$ _____
Zone Rally Total Offering = \$ _____ 75% of that for District Offering >>>	\$ _____
Gift/Memorial Donation In memory of: _____ Address _____	\$ _____
Quarterly Subs. # _____ X \$ _____ Deliver to church ___ or address below ___ or contact/address	\$ _____
Assessments # _____ X \$ _____	\$ _____
Other Explanation: _____	\$ _____
(Use the back of sheet for further correspondence)	Total Remittance
Remitted by _____ Phone # _____	\$ _____
Email address _____	
Address _____ City _____ State _____ Zip _____	

Make checks payable to Oregon District LWML

Mail to Coleen Gurske, 837 NE Donelson Rd., Hillsboro, Oregon 97124 Phone # 503-648-9497

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Society Offering for District expenses	\$ _____
Zone Rally Total Offering = \$ _____ 75% of that for District Offering >>>	\$ _____
Gift/Memorial Donation In memory of: _____ Address _____	\$ _____
Quarterly Subscriptions # _____ Deliver to church ___ or address below ___ or contact/address	\$ _____
Assessments # _____ X \$10	\$ _____
Other Explanation: _____	\$ _____
(Use the back of sheet for further correspondence)	Total Remittance
Remitted by _____ Phone # _____	\$ _____
Email address _____	
Address _____ City _____ State _____ Zip _____	

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