

# REMITTANCE FORM

DATE: \_\_\_\_\_

Name of Society: \_\_\_\_\_ Zone \_\_\_\_\_

Church Name: \_\_\_\_\_

Church Address: \_\_\_\_\_

*Street*

*City*

*State*

*Zip*

<b>Amount Remitted:</b>	\$ _____	Mite Box Offerings
	\$ _____	Quarterlies
	\$ _____	Mite Boxes (free)
	\$ _____	Other (specify)
	\$ _____	Other (specify)
	\$ _____	<b>TOTAL</b>

**NOTE:** Requests for change in number desired for the Quarterlies should be addressed to the First Vice President. Also, changes regarding the Glad Tidings should be addressed to its editors. See Glad Tidings for their names and addresses.

**Name and address of person to whom the receipt should be sent:**

Name \_\_\_\_\_

Address \_\_\_\_\_

*Street*

*City*

*State*

*Zip*

Phone \_\_\_\_\_

**Send Remittance to:**  
**Mary Harris-Thrash**  
**1408 W. Gulffield Drive**  
**Mobile, AL 36605**  
**Phone: 251-234-7431**  
**mthrash@swapte.org**

**Make Check Payable to:**  
**Gulf States District LWML**