



**FINANCIAL SECRETARY REMITTANCE FORM**  
 Lutheran Women's Missionary League  
 LWML SOUTH DAKOTA DISTRICT

Date: \_\_\_\_\_

Group (Society): \_\_\_\_\_

My Name: \_\_\_\_\_

My Address: \_\_\_\_\_  
 \_\_\_\_\_

**I'm remitting monies on behalf of: (check one)**

**Myself**

**My Group (Society)**

Name of Group: \_\_\_\_\_

Name of Congregation: \_\_\_\_\_

Congregation Address: \_\_\_\_\_  
 \_\_\_\_\_

Name of Zone where Group is located: \_\_\_\_\_

**My Zone**

Name of Zone \_\_\_\_\_

**Please identify monies being sent:**

**MITE OFFERINGS** \$ \_\_\_\_\_

**Lutheran Woman's Quarterly Subscriptions**

Year \_\_\_\_ Quantity Ordered \_\_\_\_ x \$7.50 (1-9) \$ \_\_\_\_\_

Year \_\_\_\_ Quantity Ordered \_\_\_\_ x \$6.00 (10+) \$ \_\_\_\_\_

**HiLites (in Lutheran Witness)**

Year \_\_\_\_ Quantity Ordered \_\_\_\_ x \$1.50 = \$ \_\_\_\_\_

**Special Gifts Fund** \$ \_\_\_\_\_

**Other** (Please explain below:) \$ \_\_\_\_\_  
 \_\_\_\_\_

**TOTAL:** \$ \_\_\_\_\_

**Please print two copies.** Send one copy to the Financial Secretary:

Donna Harr 11069 E. Kilarea Ave. #179, Mesa, AZ 85209 (January 1-April 1)

Donna Harr 3528 S. Prairie Gardens Pl., Sioux Falls, SD 57110 (Apr 1-Dec 31)

Please keep the second copy for your records.

**Make checks payable to:** LWML SOUTH DAKOTA DISTRICT

LWML South Dakota District Financial Secretary Remittance Form | January 2021 rev



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