MONTHLY REPORT OF MISSION SUPPORT

Month of _____

PLEASE LEAVE BLANK

AMERICAN BAPTIST CHURCHES, U.S.A.

Please retain a copy of this remittance for your records. An official receipt will be mailed to you once the gift is processed. Upon receipt, please compare the official receipt detail to your original remittance copy and notify our office of any discrepancies at (800)222-3872, ext. 2145.

RECEIPT NUMBER **DATE**

CHURCH NAME / DONOR	ASSOCIATION / AREA
CREDIT RECEIVER (NAME)	PHONE NUMBER
REGION/PIN /	E-MAIL

Send Receipt To: (Please Print)

AMERICAN BAPTIST MISSION SUPPORT *

UNITED MISSION

UNITED MISSION BASICS (UMB) $ _____

AB WOMEN'S MINISTRIES LOVE GIFT (LG) _____

UNITED MISSION DESIGNATIONS (UMD) _____

TOTAL UNITED MISSION $ _____

ANNUAL OFFERINGS

AMERICA FOR CHRIST (AFC) _____

WORLD MISSION OFFERING (WMO) _____

RETIRED MINISTERS & MISSIONARIES OFFERING (RMO) _____

ONE GREAT HOUR OF SHARING (OGH) _____

REGION OFFERING (RO) _____

INSTITUTIONAL SUPPORT (ISP) _____

SPECIFICS (SPC) _____

TARGETED GIVING (TG) _____

TOTAL AMERICAN BAPTIST MISSION SUPPORT $ _____

CAMPAIGNS FOR ABC WORK (CGN) _____

MISCELLANEOUS OBJECTIVES (MO) _____

REMITTANCE TOTAL $ _____

**** New ABMS categories have been added in accordance with the revised Common Budget Covenant for 2004. Use the codes in parenthesis following the category for the Details section.***

DETAILS FOR UMD, AFC, WMO, OGH, RO, ISP, SPC, TG, CGN, & MO.

LEAVE BLANK	(CODE)	ORGANI-ZATION	FOR WHAT WORK OR MISSIONARY	AMOUNT

MAIL TO:

THANK YOU FOR YOUR SUPPORT OF AMERICAN BAPTIST MISSIONS

Although every effort is made to comply with donor wishes, tax deductible contributions are received with the understanding that ABC-USA has complete discretion and control over the use of all donated funds.

PLEASE TEAR OFF LOWER PORTION AND COMPARE WITH YOUR RECORDS. THIS LOWER PORTION IS YOUR OFFICIAL RECEIPT.

American Baptist Churches, U.S.A. acknowledge that no goods or services were received in exchange for these gifts, except intangible religious benefits.