	_	_
3/	\sim	\mathbf{A}
3.	_	
3.	$\overline{\varsigma}$	D'
٦,	Chief	900

Fold>

CHURCH NAME / DONOR

CHURCH MISSION SUPPORT

Month of

PLEASE LEAVE BLANK

AMERICAN BAPTIST CHURCHES USA

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 your Region office or the Vallley Forge office (800-222-3872, ext. 2145) of any discrepancies.

RECEIPT NUMBER

DATE

			RECEIFT NOMBER	DATE
CREDIT	RECEIVER (NAME)	PHONE NUMBE		
			AMERICAN BAPTIST MISSION G	IVING
	REGION / PIN	E-MAIL	UNITED MISSION	AMOUNT
	/		A. United Mission Basics (UMB)	
Send Receipt To	o: (Please Print)		B. AB Women's Ministries Love Gift (LG)	
			C. America For Christ (AFC) D. Retired Ministers & Missionaries Offering (RMMO) E. Region Giving	
	POSSIBLE DESIGNATIONS Offering (WMO)		PURPOSE (Optional)	
G. One Great Hour	of Sharing (OGHS)			
H. ABCUSA, OFFICE OF THE GENERAL SECRETARY AMERICAN BAPTIST HOME MISSION SOCIETIES INTERNATIONAL MINISTRIES RECIPIENT/PROJECT			PURPOSE (Optional)	
. ALL OTHER GIV	ING			
: American Bapti	st Mission Support, P.O. Box 851	 I, Valley Forge, PA 19482-0	9851 GRAND TOTAL	s

ASSOCIATION / AREA

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 ABCUSA 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.



MAIL: