



Southern California Nevada Conference of the United Church of Christ

Remittance Form

Date: _____ Check #: _____ Amount: _____

Payor Church Name _____
 Address: _____
 City & State _____
 Remitted by _____
(Name) (Phone)

Please Do Not Write In Shaded Area	
Date Rc'd _____	
Church # _____	
Distribution	
G/L	Amount
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
TOTAL	\$

Make check Payable To: SCNC UCC

Mail To: **Southern California Nevada Conference
of the United Church of Christ**
 PO Box 1254
 Claremont, CA 91711
 (626) 798-8082 Phone

CREDIT US AS FOLLOWS:

\$ _____	Our Church's Wider Mission – Basic Support
\$ _____	Special Support:
\$ _____	Christmas Fund
\$ _____	Strengthen The Church
\$ _____	Neighbors In Need
\$ _____	One Great Hour of Sharing
\$ _____	Other Designated Gifts for National UCC:
\$ _____	Specify Ministry: _____
	Purpose: _____
\$ _____	Specify Ministry: _____
	Purpose: _____
\$ _____	Specify Ministry: _____
	Purpose: _____
\$ _____	Conference Per Capita Dues (calculated at \$12.00 per member based on Yearbook Report)
\$ _____	Designated For Other Ministries Of This Conference
	Purpose: _____
\$ _____	SCNC UCC Mission Partners:
\$ _____	Pilgrim Pines Camp
\$ _____	Pilgrim Pines CAMPERSHIPS
\$ _____	Pacific School of Religion
\$ _____	Peppermint Ridge
\$ _____	Pilgrim Place
\$ _____	Other: _____
\$ _____	TOTAL (Must Agree With Amount Of Check)

Questions? Contact Virginia Arroyo, Administrative Assistant
at (626) 798-8082 or arroyo@scnuc.org

(form can also be found at www.scnuc.org/resources/sharing_financial.htm)

MAKE A COPY FOR YOUR FILES