Southern California Nevada Conference of the United Church of Christ

Remittance Form

Date: _____ Check # _____ Amount: $ _____

Please Do Not Write In Shaded Area

Date Rc'd _____

Church # _____

Payor Church Name _____

Address: _____

City & State _____

Remitted by _____
(Name) (Phone)

Make check Payable To: SCNC UCC

Mail To: **Southern California Nevada Conference of the United Church of Christ**
333 N. Santa Anita Ave., Suite 5
Arcadia, CA 91006
(626) 798-8082

CREDIT US AS FOLLOWS:		Distribution G/L Amount
$ _____	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)	**TOTAL** $

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

MAKE A COPY FOR YOUR FILES