



Lutheran Women's Missionary League - Canada Inc.
Grow in God's Word, Share God's Son, Serve God's People

REMITTANCE VOUCHER

Date sent: _____

From: _____ (Sender's name)
_____ (Senders ph. # or email address)
_____ (Society and City)

Do you require donation receipt(s) to be issued by LWMLC Inc.? ___ YES ___ NO
If you answered YES, complete and attach page 2 of the Remittance Voucher.

Distribution:

Mite Offerings \$ _____

Memorial \$ _____

Details: _____

Honorarium \$ _____

Details _____

Other Donations \$ _____

Details _____

If there are not enough room above, please provide details in email or on another piece of paper
Total (this should match the Total Remitted on the 2nd page listing) \$ _____

Payment Method (check one): Cheque E-Transfer Credit Card

Cheque: Make payable to Lutheran Women's Missionary League - Canada Inc.

Mail to: LWMLC Financial Secretary with copy of completed remittance voucher.

E-Transfer: Make payable to financialsec@lutheranwomen.ca

In the Memo or comment area of e-transfer: enter reason for sending (Mites/Memorial/Honourarium, Invoice, etc.), phone # of sender. If a donation receipt is required, email completed remittance voucher to Financial Secretary.

Credit Card: email financialsec@lutheranwomen.ca for instructions

Email remittance voucher to Financial Secretary

LWMLC Financial Secretary addresses:

Mailing address: Penny Bobier, 7733 Lemoyne Place, Prince George, BC V2N 3N2

Email: financialsec@lutheranwomen.ca

FINANCIAL SECRETARY USE ONLY
Cheque Number:
Cheque Date:
Deposit Date:



When donation receipts are required, attached listing on below to remittance voucher (copy as needed).

Where Email address is provided, Tax Receipt will be emailed.

NAME and AMOUNT	MAILING ADDRESS and/or EMAIL ADDRESS and phone #	SOCIETY,CITY, ZONE and DISTRICT NAME	Tax Receipt Required (Y/N)
EXAMPLE: Sally Smith (Donor) \$25.00	1234 Street Name, City, Prov., Postal Code Email address, ph.#	Society , City, Zone, District Name	Y
EXAMPLE: Mites from Church offering \$375.00	Name, address, ph.# of sender		N
EXAMPLE: Memorial, Name of deceased, \$50.00	Donor's Name, address, email address and ph.#		Y
\$	Total Remitted (This should equal the total amount of remittance on page 1.)		