

PW REMITTANCE FORM-FOR USE BY LOCAL PRESBYTERIAN WOMEN TREASURER

Please Print clearly

Date: _____

Remittance from Presbyterian Women _____
(Name of Church) (Name of City)

PLEDGE:

PW Mission Pledge (AKA) PW Annual Fund \$ _____

SYNOD OF SOUTH ATLANTIC..... \$ _____

PRESBYTERIAN WOMEN- PRESBYTERY OF ST. AUGUSTINE..... \$ _____

Kay Beckman Scholarship Fund..... \$ _____

PW Birthday Offering..... \$ _____

PW Thank Offering..... \$ _____

PW Least Coin... (Do not put amount here if you are sending it to Church Women United) \$ _____

PW Hunger Fund..... \$ _____

PW Summer Medical..... \$ _____

Memorial Gift (**Attach additional form**) \$ _____

Jamaican Mutual Mission (H000107) (2 cents a Meal) \$ _____

Mental Health Assistance Fund (Through the Presbytery of St. Augustine) \$ _____

Honorary Life Membership (**Attach additional form**) \$ _____

Honorary Recognition Award (**Attach additional form**) \$ _____

Christmas International House..... \$ _____

Church Women United (City) _____ OR (County) _____ \$ _____

Church World Service - Blanket Fund..... \$ _____

Columbia Friendship Circle..... \$ _____

Columbia Theological Seminary (FKA: Montreat Archives) \$ _____

Duvall House..... \$ _____

JC Smith Theological Seminary..... \$ _____

Leadership Endowment Fund (Camp Montgomery Leadership training) \$ _____

Mission Haven..... \$ _____

Montgomery Conference Center..... \$ _____

Peacemaking..... \$ _____

Thornwell House..... Cottage Name _____ \$ _____

Urban Camp..... \$ _____

Villa International..... \$ _____

Mark if you have pg. 2 ()

Total Remittance - page 1 continue on page two if necessary \$ _____

(Grand total on page two if necessary)

On page 2 of this document**

Make check payable to: **PRESBYTERIAN WOMEN, PRESBYTERY OF ST. AUGUSTINE**

Mail to: Sharyn Kraemer
726 Winifred Drive, N
Orange Park, FL 32073

Email: ralphshar@aol.com
Phone: (325) 513-9522

This form prepared by _____, Treasurer

Address: _____

City, Zip code _____

Home (Cell) Phone: _____ Email: _____

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Please Print clearly

Use this page to write in any Benevolence that is not already printed on the first page

Please make sure you include the current address for any benevolence listed on this page.

Name	Amount\$
Address	
City, State, Zip	
Name	Amount\$
Address	
City, State, Zip	
Name	Amount\$
Address	
City, State, Zip	
Name	Amount\$
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City, State, Zip	

Total Page 2 _____

Totals Pages 1 and 2 _____