

SO THAT CHRIST'S CHURCH CAN SERVE

2016 TRANSMITTAL FORM FOR

Nebraska Synod, ELCA

6757 Newport Ave., Suite 200
Omaha, NE 68152

Cong. I.D. #, Please Today's Date

Congregation: _____
Name

Address (Include Zip Code)

Phone

Treasurer: _____
Name Home Phone

Address (Include Zip Code) Bus. Phone

Please Make Check Payable to: NEBRASKA SYNOD, ELCA.

DIVIDE CHECK AS FOLLOWS:

A. Nebraska Synod Giving

- 1. Mission Share \$ _____
- 2. Mission Field Nebraska \$ _____
- 3. Candidacy Scholarship Fund \$ _____
- 4. Seminarian Debt Reduction \$ _____

B. ELCA – Churchwide Giving

- 1. World Hunger \$ _____
- 2. Malaria Campaign \$ _____
- 3. ELCA Capital Campaign \$ _____

C. Synod Authorized Special Giving

- 1. Immanuel Communities \$ _____
- 2. Lutheran Family Services \$ _____
- 3. Midland University \$ _____
- 4. Mosaic \$ _____
- 5. Nebraska Lutheran Campus Ministries \$ _____
- 6. Nebraska Lutheran Outdoor Ministries \$ _____
- 7. Oaks Indian Center \$ _____
- 8. Tabitha Health Systems \$ _____

D. Other Special ELCA or Nebraska Synod Giving:

Describe _____ \$ _____

Check # _____ TOTAL.....\$ _____

Our fiscal year is February to January
This allows the month of January to submit your calendar year deposits.

PLEASE SEND THE ORIGINAL TO THE SYNOD TREASURER.

Keep the duplicate. Your check will be your receipt

Please do not submit offerings for ministries unrelated to the Nebraska Synod or the ELCA.