

# REMITTANCE REPORT

**Congregation**

City/Town \_\_\_\_\_  
 Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 City, Prov, Postal \_\_\_\_\_  
 Number \_\_\_\_\_



Saskatchewan Synod  
ELCIC

Address 114 Seminary Crescent  
 Saskatoon SK S7N 0X3  
 Phone 306.244.2474  
 Email finance@sasksynod.ca

**Contact regarding information on this form**

Name \_\_\_\_\_  
 Daytime phone \_\_\_\_\_  
 Email \_\_\_\_\_

For Month of \_\_\_\_\_

Benevolence Designation	Synod Account No.	Amount
<b>I. Sask Synod Mission Support</b>		
Congregational Benevolence	6100	
Hospital Chaplaincy - Regina	6061	
Seminary Student Sponsorship	6049	
Bishop's Discretionary Fund	6098	
Other convention levies	6120	
Other leadership conference registration	6105	
<b>II. National ELCIC Mission support</b>		
Global Mission	6021	
Canadian Missions	6023	
Argentina - Patagonia Mission	6082	
ELCIC Praise Appeal	6031	
<b>III. Development, Relief, and Justice</b>		
Canadian Lutheran World Relief (CLWR) - Unspecified	6010	
CLWR Special Appeal (please specify)	6011	
Canadian Foodgrains Bank	6024	
<b>IV. Other</b>		
LuMinHos / Lutheran Care Society - Saskatoon	6060	
Lutheran Theological Seminary	6051	
Luther College - Regina	6052	
Lutheran Collegiate Bible Institute - Outlook	6050	
Lutheran Campus Ministry - Saskatoon	6047	
Kinasao Lutheran Bible Camp	6075	
LutherCare Communities	6062	

Total of cheque(s) enclosed (payable to Saskatchewan Synod ELCIC) \_\_\_\_\_