MISSION NORTHWEST

MONTHLY REPORT OF MISSION SUPPORT

Month of _____

CHURCH/DONOR NAME	PHONE
REGION/PIN NW/	E-MAIL

Send Receipt To: (Please Print)

PLEASE LEAVE BLANK

AMERICAN BAPTIST CHURCHES, U.S.A.

Please retain a copy of this remittance for your records. An official receipt will be mailed to you once the gift is processed. Upon receipt, please compare the official receipt detail to your original remittance copy and notify your Region Office at 1-800-438-5288 or ABC USA at (800) ABC-3USA ext 2145 of any discrepencies

RECEIPT NUMBER **DATE**

***Offering Details (Codes: AFC, WMO, OGH, RO ISP, SPC, TG, CGN, & MO)**

	Code	ORGANI-ZATION	FOR WHAT WORK OR MISSIONARY	AMOUNT
	RO	NW	Mission NW Region Offering	
	SPC	NW	Mission NW New Church Planting	
	SPC	NW	Mission NW Pastors Emergency Fund	

AMERICAN BAPTIST MISSION SUPPORT*

MISSION NW SUPPORT (RO) $ _____

UNITED MISSION

UNITED MISSION BASICS (UMB) $ _____

AB WOMEN'S MINISTRIES LOVE GIFT (LG) $ _____

ANNUAL OFFERINGS

AMERICA FOR CHRIST (AFC) $ _____

WORLD MISSION OFFERING (WMO) $ _____

RETIRED MINISTERS & MISSIONARIES OFFERING (RMO) $ _____

ONE GREAT HOUR OF SHARING (OGH) $ _____

MISSION NW REGION OFFERING (RO) $ _____

INSTITUTIONAL SUPPORT (ISP) $ _____

SPECIFICS (SPC) $ _____

TARGETED GIVING (TG) $ _____

CAMPAIGNS FOR ABC WORK (CGN) $ _____

MISCELLANEOUS OBJECTIVES (MO) $ _____

REMITTANCE TOTAL $ _____

Use the codes in parenthesis following the category for the Details section.

MAKE CHECKS PAYABLE TO:

Mission Northwest
601 S Ross Point Rd
Post Falls, ID 83854

THANK YOU FOR YOUR SUPPORT OF AMERICAN BAPTIST MISSIONS

Although every effort is made to comply with donor wishes, tax deductions are received with the understanding that ABC-USA has complete discretion and control over the use of all donated funds.

Per IRS guidelines, American Baptist Churches USA acknowledge that no goods or services were received in exchange for these gifts, except intangible religious benefits