

MITE BOX REMITTANCE  
(Please made copies as needed)



To the Society Treasurer:

Please complete this form and include with Mite offering and other contributions to be sent to the N WI District LWML Financial Secretary to receive proper credit. In accord with our bylaws, Mite Box donations are to be submitted quarterly: January, April, July, and October, but you are strongly urged to send them in monthly or as often as you collect them. (You may wish to make a copy of this form for your records before sending it.)

ZONE \_\_\_\_\_ DATE \_\_\_\_\_  
Name of Church \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_  
Pastor \_\_\_\_\_  
Society \_\_\_\_\_  
President \_\_\_\_\_  
Society Treasurer \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_

MITE BOX OFFERING \$ \_\_\_\_\_  
LWML QUARTERLIES \$ \_\_\_\_\_  
OTHER \_\_\_\_\_ \$ \_\_\_\_\_  
TOTAL \$ \_\_\_\_\_

- 1. Make check payable to:  
N WI District LWML
- 2. Fill out this remittance form.
- 3. Mail check and remittance form to:

Debbie Schalow  
5059 Sunset Circle  
Vesper, WI 54489  
Ph: 715-569-4878  
dshalow@tds.net

MITE BOX REMITTANCE  
(Please made copies as needed)



To the Society Treasurer:

Please complete this form and include with Mite offering and other contributions to be sent to the N WI District LWML Financial Secretary to receive proper credit. In accord with our bylaws, Mite Box donations are to be submitted quarterly: January, April, July, and October, but you are strongly urged to send them in monthly or as often as you collect them. (You may wish to make a copy of this form for your records before sending it.)

ZONE \_\_\_\_\_ DATE \_\_\_\_\_  
Name of Church \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_  
Pastor \_\_\_\_\_  
Society \_\_\_\_\_  
President \_\_\_\_\_  
Society Treasurer \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_

MITE BOX OFFERING \$ \_\_\_\_\_  
LWML QUARTERLIES \$ \_\_\_\_\_  
OTHER \_\_\_\_\_ \$ \_\_\_\_\_  
TOTAL \$ \_\_\_\_\_

- 1. Make check payable to:  
N WI District LWML
- 2. Fill out this remittance form.
- 3. Mail check and remittance form to:

Debbie Schalow  
5059 Sunset Circle  
Vesper, WI 54489  
Ph: 715-569-4878  
dshalow@tds.net