

# MW District Ministry Shares Remittance Form

\*\*Please include this completed form with your payment

**DATE:**

**Chk #:**

**Church 6 Digit GCFA Id #:**

**Church Name:**

**Contact Name:** \_\_\_\_\_

**Contact Email:** \_\_\_\_\_

Midwest District Ministry Shares Amount Paid \$ \_\_\_\_\_

Muskegon Methodist Ministries (if applicable) \$ \_\_\_\_\_

Midwest District Missions (in addition to MS payment) \$ \_\_\_\_\_

**Check Total:** \$ \_\_\_\_\_

Please make District Ministry Shares checks payable to "Midwest District" and mail to:

**Midwest District Ministry Shares  
207 Fulton St. E Suite 6  
Grand Rapids, MI 49503**



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