

PW-NCP Funds Transmittal Form

Church Name: _____

Check Number: _____

Check Date: _____ Check Amount: \$ _____

Fund(s) to be credited	Amount
Local Support @ \$3.00/person	
Worldwide Mission Support	
Birthday Offering (Spring)	
Thank Offering (Fall)	
Honorary Life Membership \$95/Silver	
Honorary Life Membership \$250/Gold	
Memorial/Recognition Gifts	
Least Coin	
Other	

Please make the check payable to PW-NCP.

Mail to:

Stephanie Berg
8318 Tobin Road #32
Annandale, VA 22003
(703)849-8937
bergsp@aol.com

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