

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 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 checks payable to PW-NCP.

*** Make check payable: of Presbyterian Women**

Mail to:

June Eakin, Treasurer
13221 Glenhill Rd
Silver Spring, MD 20904-3260
(301) 873-4794
june.eakin@mac.com

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