



Northern Illinois Synod  
Evangelical Lutheran Church in America

**Congregational Mission Support Remittance Form**

Fillable Electronically or Printable

\_\_\_\_\_  
Congregation Name

\_\_\_\_\_  
Congregation City

\_\_\_\_\_  
Remittance Month

\_\_\_\_\_  
Remittance Year

\_\_\_\_\_  
Remittance Prepared By

\_\_\_\_\_  
Email

Mission Support	\$	
NIS Endowment/Trust Fund*	\$	
ELCA World Hunger	\$	
ELCA Lutheran Disaster Response	\$	Please Specify:
Missionary Sponsorship	\$	Please Specify:
Global Missions	\$	Please Specify:
Other Designated Gifts	\$	Please Specify:
<b>Total</b>	\$	

Please make checks payable to:

**Northern Illinois Synod**

**P.O. Box 443**

**Moline, IL 61266**

\*Signer acknowledges and agrees that donations to NIS Endowment Fund may be released or modified from the original restrictions in times of emergency by a 2/3 vote of the Northern Illinois Synod Council or may be reallocated upon dissolution of the Northern Illinois Synod.