



FINANCIAL REMITTANCE FORM

LWML MN North District – (2024-2026 Biennium)

DATE _____

Region _____

Zone _____

Group _____

Church _____

Address _____

State _____ Zip _____

Mite Box Offerings	\$ _____
Special – For MN North Mission Grants	\$ _____
Special – For General Fund	\$ _____
Rally Offering	\$ _____
Workshop Offering	\$ _____
Prayer Service Offering	\$ _____
LWML Sunday Offering	\$ _____
National Convention Expense Fund Dues	\$ _____
Memorial (Given in memory of : _____)	\$ _____
(From: _____)	
Other (Explain) _____	\$ _____
CHECK # _____	TOTAL AMOUNT \$ _____

Remitted by _____

Address _____

State _____ Zip _____

Phone # _____

Make checks payable to:

LWML MN North District

Please send this form to:

Leanna Hasbargen
12867 State Hwy 11 SE
Baudette, MN 56623



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