



Southeastern Iowa Synod
Evangelical Lutheran Church in America

Congregational Remittance Form

Please complete and mail this form with your check made payable to:
Southeastern Iowa Synod, ELCA
2635 Northgate Drive
Iowa City, IA 52245

For the month of: _____ Congregation Number: _____

Congregation: _____ City: _____

Contact Name: _____ Contact Phone or Email: _____

Mission Support: Pledge Year _____ \$ _____

ELCA Churchwide Ministries:

World Hunger _____ \$ _____
Lutheran Disaster Response _____ \$ _____
Lutheran World Relief _____ \$ _____
Missionary Sponsorship _____ \$ _____
Missionary Sponsorship (please give name) _____ \$ _____
Other _____ \$ _____
Other _____ \$ _____
Other _____ \$ _____

Southeastern Iowa Synod Ministries:

Quad Cities Latino Ministry / Iglesia Camino de Emaus _____ \$ _____
Candidacy _____ \$ _____
Coaching Program _____ \$ _____
Youth and Families Initiative _____ \$ _____
Southeastern Iowa Synod Fund for Leaders _____ \$ _____
Bishop's Emergency Fund _____ \$ _____

Southeastern Iowa Synod Partnerships:

Iowa Lutheran Campus Ministries _____ \$ _____
Lutheran Lakeside _____ \$ _____
EWALU _____ \$ _____
Lutheran Services in Iowa _____ \$ _____
Wartburg Seminary _____ \$ _____
Lutheran School of Theology _____ \$ _____
Other _____ \$ _____

TOTAL REMITTANCE: \$ _____