

(This form valid January 1, 2018 to December 31, 2020)

Make all checks payable to: ABW Ministries of IN

Donation given by _____ (Association, circle, individual, etc.)

Name of church _____ Association _____

Your Name _____ Your address _____

Town and Zip Code _____

Amount Fund
\$ _____ Operating Fund
\$ _____ State Project *
\$ _____ Scholarship **
\$ _____ Leadership Development
\$ _____ Refit
\$ _____ Other

Amount Fund
\$ _____ National Support
\$ _____ National Endowment
\$ _____ AB Women & Girls Mission Fund
\$ _____ Ella Mae Tomlinson Memorial Fund for
AB GIRLS of Indiana

*State Project check MUST be postmarked by 12/31 to count toward current year's goal.

**Scholarship check MUST be postmarked by 3/31 to determine number of scholarships given in current year.

Mail to: Judy Cutler, Treasurer (765-483-0253)

704 Hamilton Street
Lebanon, IN 46052

Check Number _____ **Date** _____

Total Amount Enclosed _____

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