

RECEIPTS FORM

Holston Presbytery, Inc.

PO Box 3647

Kingsport, TN 37664

PLEASE RETURN WITH EACH CHECK SENT

DATE: _____

Church: _____

Contact: _____ **Phone #** _____

Treasurer: _____ **Phone#** _____

UNIFIED Mission Giving: \$ _____

PCUSA Missionary Support – please include PCUSA Support Number and \$ amount

- | | |
|----------|----------|
| 1. _____ | 5. _____ |
| 2. _____ | 6. _____ |
| 3. _____ | 7. _____ |
| 4. _____ | 8. _____ |

\$ _____

Presbyterian Campus Ministry \$ _____

Other: Please include Address or ECO Number

_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

Gifts to Special Causes (Not included in Presbytery Mission Budget):

All monies sent to Presbytery Office will be disbursed at month's end.

Presbytery:

5 Cents a Meal \$ _____

TOTAL \$ _____

IT IS UNDERSTOOD THAT THIS DECLARATION OF INTENTIONS MAY BE CHANGED AT ANY TIME BY NOTIFYING HOLSTON PRESBYTERY OFFICE.