

# 2019 MT DISTRICT-LCMS RECEIPTS VOUCHER

**Remit Payment to: THE MONTANA DISTRICT- LCMS (Attn: Treasurer)  
30 BROADWATER AVE, BILLINGS, MT 59101 (Phone: 406-259-2908)**

Enclosed find the amount of \$ \_\_\_\_\_ ,

From (Congregation) \_\_\_\_\_ in (city) \_\_\_\_\_ , to be credited as follows:

<i>2019 District/Synod Missions, Assessments, and Registration Fees:</i>	\$ Amount
<b>General Fund (District &amp; Synod Mission; Congregation Plan of Support/Donation)</b>	
<b>Invoiced Items:</b>	
<b>District and Synodical Conference Assessment *</b>	
<b>Pastor &amp; Circuit Conference Assessment **</b>	
<b>Registration Fees:</b>	
<b>Pastor Wives Retreat</b>	
<b>Early Childhood/Educators Conference</b>	
<b>Youth Camp/Retreat</b>	
<b>Featured Ministries:</b>	
<b>Missions</b>	
<b>Circle of Life (Lame Deer, MT)</b>	
<b>Crow Lutheran Ministry (Crow Agency, MT)</b>	
<b>Redeemer Lutheran Church (Anaconda, MT)</b>	
<b>Emmaus Lutheran Mission (Big Timber/Livingston, MT)</b>	
<b>District Schools Scholarships Fund</b>	
<b>Mercy Fund (in accordance with IRS rules, do not specify recipient)</b>	
<b>Other: (Please indicate purpose and use of funds)</b>	
<i>NOTE: (acceptance of restricted use funds by District must be approved by the Board of Directors)</i>	
<b>Total Remittance \$</b>	

\*Convention Assessment is based on reported Confirmed Membership = Confirmed and/or received as an adult member of the congregation. Number taken from last reported annual congregational LCMS statistical report on file. Please submit payment with a copy of the invoice issued in February.

\*\*Amount invoiced based on the number of pastors serving the congregation. Please submit payment with a copy of the invoice issued in February.

<b>Check #</b>	<b>Date:</b>	<b>Amount:</b>
<b>Check #</b>	<b>Date:</b>	<b>Amount:</b>

**Treasurer's/Book Keeper Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **E-Mail:** \_\_\_\_\_

**Date:** \_\_\_\_\_ **Signature:** \_\_\_\_\_