

Presbytery of Chicago

2019 REMITTANCE FORM

Please Include This Form With Each Check

Paid By:

Church Name: _____

City: _____

The check enclosed is for the following:

2019 Per Capita (\$34.22 per member) \$ _____

2018 Prior Year Per Capita \$ _____

Shared Mission Giving \$ _____

(will be distributed 73% Chicago, 22% GA, 5% Synod)

Special Offerings

One Great Hour of Sharing \$ _____

Pentecost \$ _____

Peace & Global Witness \$ _____

Christmas Joy Offering \$ _____

PC(USA) Project or Cause

Project Name	Number	
_____	_____	\$ _____

_____	_____	\$ _____
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_____	_____	\$ _____
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Other (Description)

_____ \$ _____

_____ \$ _____

_____ \$ _____

Total **Check #** _____ \$ _____

Please make checks payable to and mail to

Presbytery of Chicago
815 W. Van Buren, Suite 500
Chicago, IL 60607

Questions

Please contact Eric Heinekamp, Treasurer
eheinekamp@chicagopresbytery.org
(312)488-3016