



SO THAT CHRIST'S CHURCH CAN SERVE

2017 TRANSMITTAL FORM FOR  
**Nebraska Synod, ELCA**  
 6757 Newport Ave., Suite 200  
 Omaha, NE 68152

**MINISTRY INFORMATION**

_____ CONGREGATION NUMBER	_____ CONTACT NAME
_____ CONGREGATION NAME	_____ CONTACT PHONE NUMBER
_____ CONGREGATION ADDRESS	_____ CONTACT E-MAIL

**REMITTANCE : Please Make Check Payable to: NEBRASKA SYNOD, ELCA.**

DIVIDE CHECK AS FOLLOWS:

<b>MISSION SHARE</b>	\$ _____
<b>Other Nebraska Synod Giving</b>	
Mission Field Nebraska	\$ _____
Candidacy Scholarship Fund	\$ _____
Seminarian Debt Reduction	\$ _____
<b>ELCA – Churchwide Giving</b>	
World Hunger	\$ _____
Disaster Relief	\$ _____
ELCA Capital Campaign	\$ _____
<b>Synod Authorized Special Giving</b>	
Immanuel Communities	\$ _____
Lutheran Family Services	\$ _____
Midland University	\$ _____
Mosaic	\$ _____
Nebraska Lutheran Campus Ministries	\$ _____
Nebraska Lutheran Outdoor Ministries	\$ _____
Oaks Indian Center	\$ _____
Tabitha Health Systems	\$ _____
<b>Other Special ELCA or Nebraska Synod Giving:</b>	
Describe _____	\$ _____
Check # _____	<b>TOTAL \$ _____</b>

Our fiscal year is February 2017 to January 2018  
 This allows the month of January to submit your calendar year deposits.

PLEASE SEND THE ORIGINAL TO THE SYNOD TREASURER.  
 Keep the duplicate. Your check will be your receipt

**Please do not submit offerings for ministries unrelated to the Nebraska Synod or the ELCA.**