CNJEORNIA NEVADA CO	Southern California Nevada Con	ference
All and a second	of the United Church of Chr	ist
	Remittance Form	
Date:	Check #: Amount: \$	
Payer Church Na Address:		Please Do Not Write In Shaded Area This is for office use only
City & State:		Date Rc'd
Remitted by:		
	(Name) (Phone)	Church #
	Make check Payable To: SCNC UCC	
IV	 Iail To: Southern California Nevada Conference of the United Church of Christ 333 N. Santa Anita Ave., Suite 5, Arcadia, CA 91006 (626) 798-8082 	Distribution G/L Amount
You may also	use Tithe.ly to transfer your contributions to our general account	
CREDIT US AS	FOLLOWS: Please send offerings as soon as you are able	
\$	SCNC Per Capita Dues (\$12 per member based on Annual Yearbook) 100% to SCNC for staffing and Operations	\$
\$	OCWM (Our Churches Wider Mission) Basic Support 90% used in SCNC/10% used in National UCC	\$
\$	OCWM Special Support Please send the first 3 offerings as you are able All offerings must be received by 1/5 to get credit for 5 for 5 \$	\$ \$ \$
and per capita givin and Committees on	ff, services, and programming is completely supported by OCWM Basic Support g from congregations. Everything we do - search and call, guidance for Associations a Ministry, support for churches in transition or conflict, pastoral counseling for al programming is dependent on donations from our congregations.	\$
Additional Donatio	ons to Conference or National Ministries	
	\$ Specify Ministry:	\$
	\$ Specify Ministry: \$ Specify Ministry: Purpose: Purpose:	\$
	FOTAL (Must Agree With Amount of Check) s? Contact Virginia Arroyo, (626) 798-8082 or arroyo@scncucc.org or	TOTAL \$
	Rachael Pryor, (620) 504-2888 or pryor@scncucc.org	