

**NORTH CENTRAL DISTRICT**  
of The C&MA



**Church Contribution Form – Attendance Over 50**

Church's Name \_\_\_\_\_ Period Covered \_\_\_\_\_  
 Church code \_\_\_\_\_  
 Address \_\_\_\_\_  
 City/State/Zip \_\_\_\_\_  
 Treasurer's Name \_\_\_\_\_ Email: \_\_\_\_\_ @ \_\_\_\_\_

**District Ministry Budget**

\$ \_\_\_\_\_ minus \$( \_\_\_\_\_ ) = \$ \_\_\_\_\_ x 7%      \$ \_\_\_\_\_  
 (gross)                      (exclusions\*)                      (net)

\*Exclusions include funds for missions, building funds, mortgage and rental payments for buildings, and designated funds for non-operational projects.

**Pastor's Contribution to District Ministry Budget** (If church sends pastor's contribution in directly.)

Pastor's Name \_\_\_\_\_ \$ \_\_\_\_\_

**Big Sandy Camp & Retreat Center – Church in Camp Area**  
 (\$.25/person/month/average Sunday morning attendance)

\$ \_\_\_\_\_

**Other Contributions (Please specify)**

\_\_\_\_\_ \$ \_\_\_\_\_  
 \_\_\_\_\_ \$ \_\_\_\_\_  
 \_\_\_\_\_ \$ \_\_\_\_\_

**TOTAL CONTRIBUTION –** Verify amount matches check amount      \$ \_\_\_\_\_  
 (Make check payable to the NORTH CENTRAL DISTRICT of The C&MA)

**Mail this form to:**

North Central District of The C&MA, 8860 College View Drive, Saint Bonifacius, MN 55375-4504

**NOTE:** All Great Commission, CAMA, and Intercultural Ministry funds should be sent to the National Office at The Christian and Missionary Alliance, P O Box 35000, Colorado Springs, CO 80935-3500

**Please duplicate this form as needed**

** OFFICE USE ONLY **	
Date Rec'd _____	DOB \$ _____
Check # _____	BSCRC \$ _____
Church Code _____	Other _____ \$ _____
Amount Received \$ _____	Notes _____