



MISSION GIVING REPORT

FOR MONTH _____ YEAR _____

KEEP PINK COPY FOR YOUR RECORDS
MAIL WHITE & YELLOW COPY

by 1st of each month

To: West Virginia Baptist Convention
P.O. Box 1019
Parkersburg, WV 26102
Phone: 1.304.422.6449 - 1.800.879.9822

CHURCH NAME _____		ASSOCIATION _____	
CHURCH ADDRESS _____			
PHONE _____		E-MAIL _____	
REGION: WVBC		PIN _____	

OFFICE USE ONLY

DATE RECEIVED _____

CHECK # _____

RECEIPT # _____

AMERICAN BAPTIST MISSION SUPPORT

A. UNITED MISSION BASICS

A. _____

B. UNITED MISSION LOVE GIFT

B. _____

TOTAL - UNITED MISSION (A-B) \$ _____

C. AMERICA FOR CHRIST OFFERING

(C) AFC \$ _____

D. RETIRED MINISTERS AND MISSIONARIES OFFERING

(D) RMMO \$ _____

E. MOUNTAIN STATE MISSION OFFERING

(E) MSMO \$ _____

F. WORLD MISSION OFFERING

1. _____ UNRESTRICTED _____ 1. _____

2. _____ 2. _____

3. _____ 3. _____

4. _____ 4. _____

5. _____ 5. _____

6. _____ 6. _____

DIRECTED
MISSIONARY
SUPPORT

TOTAL - WORLD MISSION OFFERING (1-6) F. WMO \$ _____

G. ONE GREAT HOUR OF SHARING OFFERING

1. _____ UNRESTRICTED _____ 1. _____

DIRECTED 2. _____ 2. _____

TOTAL - ONE GREAT HOUR OF SHARING (1-2) G. OGHS \$ _____

H. ITEMIZED GIVING

SPECIFICS

1. WEST VIRGINIA BAPTIST CONVENTION _____

2. PARCHMENT VALLEY CONF. CENTER _____

3. WV BAPTIST CAMP AT COWEN _____

4. OFFICE OF GENERAL SECRETARY _____

5. WVBC ABW MINISTRIES _____

6. _____

7. _____

TARGETED

8. _____

9. _____

TOTAL - ITEMIZED GIVING (1-9.) H. IG \$ _____

I. OTHER GIVING

INSTITUTIONAL SUPPORT

1. BAPTIST CAMPUS MINISTRIES - WV _____

2. _____

MISC. OBJECTIVES*

3. _____

4. _____

5. _____

CAMPAIGNS*

6. _____

*Flow through giving not part of ABMS.

TOTAL - OTHER GIVING (1-6) I. OG \$ _____

TREASURER'S NAME _____

ADDRESS _____

CITY, STATE, ZIP _____

REMITTANCE TOTAL TOTAL (A-I) \$ _____

Verify check amount.

Quarterly reports will be
mailed to confirm posting.

CHECK AMOUNT