_____ UMW MISSION GIVING 202__							
Name							
Address							
Phone							
Pledge - $_____							
	Pledge	Other					
January							
February							
March							
April							
May							
June							
July							
August							
September							
October							
November							
December							
Total	**-**	**-**					
	_____, Treasurer						
This form can be used if a unit has members who wish to have a receipt of giving for income tax							
or other purposes.							