

**REMITTANCE FORM for MITES  
and SCHOLARSHIP / MEMORIAL / ENDOWMENT FUNDS**

Date Zone #

Society Name

Church Name

Church Address/City/State

Church email

Sender’s Name

Sender’s Email Address & Phone #

**MITE OFFERING: $**

(50% CNH Mission Grants | 25% General Fund | 25% LWML)

**BITES FOR MITES OFFERING: $**

(75% CNH Mission Grants | 25% LWML)

**RUBIN PERPETUAL SCHOLARSHIP FUND (100%): $**

**STEINBECK MEMORIAL SCHOLARSHIP FUND (100%): $**

**OTHER\*: $**

**\*Please Specify:**

Make checks payable to: **LWML CNH**

Send completed Remittance Form & check(s) to CNH District Financial Secretary

**Barbara Guevara  
PO Box 1522  
Millbrae, CA 94030-5522**  
Email: [tisbarb@sbcglobal.net](mailto:tisbarb@sbcglobal.net)

Make copies of this form as needed. Send **one** copy with your remittance.