

To: The Diocese of Kootenay
 1876 Richter Street,
 Kelowna, BC, V1Y 2M9

Note: Send original
 with remittance and
 keep a copy.

MONTHLY REMITTANCE FORM

FOR THE MONTH OF: _____ 200 _____

PARISH OF: _____

TREASURER: _____

A. Total Stipend, Housing and Travel Allowance for:		
1)		
2)		
3)		
4)		
5)		
B. Kootenay Forward Fund Grant	()
C. Diocesan Family Budget		
D. Clergy Moving Fund		
E. Insurance		
F. Primate's World Relief Fund (PWRDF)		
G. Kootenay Forward Fund Donation		
H. Parish Loan Inv #		
<u>OTHER ITEMS:</u> Please specify.		
I. Kootenay Cares Pass-thru		
J.		
K.		
L.		

CHEQUE # _____ TOTAL PAYMENT \$ _____

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