

# MISSION PROGRAM REMITTANCE

MAIL TO: CENTRAL FLORIDA PRESBYTERY      PIN NUMBER \_\_\_\_\_  
3101 MAGUIRE BLVD, SUITE 244      CHURCH \_\_\_\_\_  
ORLANDO, FL 32803      MONTH PAYING \_\_\_\_\_  
DATE \_\_\_\_\_  
PREPARER/CONTACT# \_\_\_\_\_

## MISSION SUPPORT

**THE BASIC MISSION SUPPORT COMMITMENT FROM OUR CONGREGATION IN 2023 WILL BE \$ \_\_\_\_\_**

TYPE 1. SHARED MISSION SUPPORT (APPROVED %)      \$ \_\_\_\_\_  
(G.A.-20%, SYNOD-1%, PRESBYTERY-79%)

TYPE 2. SHARED MISSION SUPPORT TO GA \_\_\_\_\_ %      \$ \_\_\_\_\_

TYPE 3. SHARED MISSION SUPPORT TO SYNOD \_\_\_\_\_ %      \$ \_\_\_\_\_

TYPE 4. SHARED MISSION SUPPORT TO PRESBYTERY \_\_\_\_\_ %      \$ \_\_\_\_\_

TYPE 5. DIRECTED MISSION SUPPORT - GENERAL ASSEMBLY      PROJECT #  
\_\_\_\_\_      \_\_\_\_\_      \$ \_\_\_\_\_  
\_\_\_\_\_      \_\_\_\_\_      \$ \_\_\_\_\_  
\_\_\_\_\_      \_\_\_\_\_      \$ \_\_\_\_\_

TYPE 6. DIRECTED MISSION SUPPORT - PRESBYTERY  
\_\_\_\_\_      \$ \_\_\_\_\_

**TOTAL FOR MISSION SUPPORT TYPES 1 - 6      (A) \$ \_\_\_\_\_**

## SPECIAL OFFERINGS

(enter details on back)

TYPE 8. SPECIAL (OVER AND ABOVE) GIFTS/OFFERINGS

- A. FOR GENERAL ASSEMBLY PROGRAMS      \$ \_\_\_\_\_
- B. FOR SYNOD PROGRAMS      \$ \_\_\_\_\_
- C. FOR PRESBYTERY PROGRAMS      \$ \_\_\_\_\_
- D. FOR OTHER AGENCIES/PROGRAMS      \$ \_\_\_\_\_

**TOTAL FOR SPECIAL OFFERINGS TYPE 8      (B) \$ \_\_\_\_\_**

TYPE 9. PER CAPITA APPORTIONMENT (FOR 2023)      (C) \$ \_\_\_\_\_

**TOTAL AMOUNT OF CHECK ENCLOSED (A + B + C)      \$ \_\_\_\_\_**

CHECK NO. \_\_\_\_\_  
(Instructions on Other Side)

This Mission Program Remittance Report form is meant to help you clearly and uniformly make your monthly remittances to the Presbytery office. This, in turn, assists the treasurers of the Presbytery, Synod and General Assembly in their accurate handling of your church's money. **Please mail your report in no later than the last day of each month.** (Only one check is necessary to cover all items.) If you need help, please do not hesitate to call Nancy Cox @ 407-422-7125 x205 or [finance@cfpresbytery.org](mailto:finance@cfpresbytery.org).

**Presbyterian Church (USA) Mission Program**

The following categories are to identify monies which **DO** apply toward your church's acceptance of the Mission Dollar Commitment (shared mission/directed mission) for the overall work of Presbytery, Synod, and General Assembly.

- Type 1. Monies for Shared Mission Support to the General Assembly, Synod and Presbytery. It will be distributed according to the approved budget percentages for the current year adopted by Presbytery.
- Type 2. Monies to go only to General Assembly's mission support.
- Type 3. Monies to go only to Synod's mission support.
- Type 4. Monies to go only to Presbytery's mission support.
- Type 5. Monies designated to go to directed mission support of the General Assembly. Please be sure to identify the missionary or cause by name.
- Type 6. Monies designated to go to directed mission support of Presbytery.

**TOTAL FOR ALL SHARED/DIRECTED GIVING (A) - This will apply toward the Mission Dollar Commitment your church has made for the current year.**

<b>Type 8A. GENERAL ASSEMBLY</b>	<b>Amount</b>	<b>Type 8C. PRESBYTERY</b>	<b>Amount</b>
One Great Hour of Sharing	\$ _____	Scholarship Fund for Church Vocations	\$ _____
Pentecost	\$ _____	Five Cents Per Meal	\$ _____
Peace & Global Witness	\$ _____	Heifer Project	
Christmas Joy	\$ _____	Undesignated	\$ _____
Extra Commitment Opportunities		VBS	\$ _____
ID# _____	\$ _____	NCD	\$ _____
ID# _____	\$ _____	Cuba	
ID# _____	\$ _____	Transportation	\$ _____
Theological Education	\$ _____	Partnership	\$ _____
Outreach Foundation	\$ _____	Leadership	\$ _____
Presbyterian Disaster Fund		Other (Please specify)	
ID# _____	\$ _____	_____	\$ _____
ID# _____	\$ _____	_____	\$ _____
ID# _____	\$ _____	_____	\$ _____
Other (Please specify)			
_____	\$ _____		
_____	\$ _____		
<b>ENTER TOTAL ON FRONT LINE 8A</b>	<b>\$ _____</b>	<b>ENTER TOTAL ON FRONT LINE 8C</b>	<b>\$ _____</b>

<b>Type 8B. SYNOD</b>	<b>Amount</b>	<b>Type 8D. OTHER</b>	<b>Amount</b>
Thornwell Home	\$ _____	Duvall Home	\$ _____
Caring for Generations	\$ _____	Special Gathering	\$ _____
Presbyterian Retire. Communities	\$ _____	Church World Service	
Other (Please specify)		Undesignated	\$ _____
_____	\$ _____	Blankets	\$ _____
_____	\$ _____	Other (Please specify)	
_____	\$ _____	_____	\$ _____
_____	\$ _____	_____	\$ _____
<b>ENTER TOTAL ON FRONT LINE 8B</b>	<b>\$ _____</b>	<b>ENTER TOTAL ON FRONT LINE 8D</b>	<b>\$ _____</b>