

LWML-NED Remittance Form

Please make checks payable to **LWML-NED** and mail to:
Shirley Schindler, 6 Davis Road, Ellington, CT 06029
Treasurer@LWML-NED.org (www.lwml-ned.org)



Treasurer's Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Society: _____ Zone: _____

Church Name: _____

City: _____ State: _____

\$ _____ Mite Box Remittance

\$ _____ Memorial: In memory of _____

\$ _____ **Total Enclosed**

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