Lutheran World Relief Ingathering Report LWML Texas District



Date:							
CONGREGATION NAME:							
Address:							
City, State, ZIP Code:							
Contact Person:	ontact Person: Phone:						
Email:							
CIRCLE ONE:	ELCA	ELDONA	LCMC	LCMS	NALC		
LCMS Churches – LWML Group Name:							

LWR ITEM	QUANTITY	# OF BOXES
QUILTS		
BLANKETS – No Fleece		
SCHOOL KITS		
PERSONAL CARE KITS		
BABY CARE KITS		
FABRIC KITS		
Optional QUILT & KIT SHIPPING FUND (Amount sent directly to LWR)	\$	

Please complete this form and bring with you to drop-off site. You may also wish to keep a copy for your records.

PRINT WITH BOLD BLACK LETTERS

Lutheran World Relief: Year	Lutheran World Relief: Year			
Congregation:	Congregation:			
Address:				
City:ZIP:	City:ZIP:			
Contents:	Contents:			
Type of Item:	Type of Item:			
Number:	Number:			
Lutheran World Relief: Year	Lutheran World Relief: Year			
Congregation:	Congregation:			
Address:	Address:			
City:ZIP:	City:ZIP:			
Contents:	Contents:			
Type of Item:	Type of Item:			
Number:	Number:			