

Church Report Form

Church Name: Please provide the following information for the <i>individual</i> filling out the form (please print): Name:			
		Mailing Address:	
		City, State, and Zip:	
Phone (include area code):	Email:		
Quarter: [] 1 st [] 2 nd [] 3 rd	[] 4 th Year		
canned and frozen product line, and Kim's Sir total reported on this form, and the labels destro No Worthington or Loma Linda canned products company.	s have been included in the total, as those are not eligible for five cents from this food		
A total of \$ (\$.05 for each label) sh	nould be collected by the conference from Heritage Health Food.		
Signature of person filling out form:	Date:		

Guidelines:

- Only labels from the eligible products named above can be reported on this form.
- Heritage has six new items (with paper label) that are eligible—UPC begins with 8 53205**** *
- All eligible labels reported will be reimbursed at \$0.05 each.
- Payment will be made to the Conference.
- Funds received will be used for the worthy project chosen.
- Mail church report form to your local conference office.
- Due date to be counted for 1st quarter is April 30; 2nd quarter is July 31; 3rd quarter is October 31; 4th quarter is January 31.