

Statement of Intent for 2018

Shared Mission Support for Synod and Churchwide Ministries

Instructions: Please return this form to the Northern Illinois Synod Office, 103 W. State Street, Rockford, IL 61101 by February 1, 2018. (This information helps in the preparation of the synod's budget. After your annual meeting you can call June Cain, synod bookkeeper at 815-964-9934 or e-mail jcain@nisynod.org if your pledge has changed.)

Name of Congregation: _____

Address: _____

City, State, Zip: _____

Telephone Number: _____

Congregational Code Number: _____ Conference: _____

E-mail Address: _____

Submitted by: _____

Mission Support is the proportionate share of a congregation's income that is designated to support the mission and ministry of the church as expressed through the Northern Illinois Synod and the Evangelical Lutheran Church in America. The Northern Illinois Synod shares 55% of all Mission Support dollars with our ELCA for churchwide ministries.

2017 Actual Mission Support

In 2017, our congregation gave \$_____ as Mission Support, which was _____% of our 2017 regular giving by members.

2018 Mission Support Goal

In 2018, our congregation's goal is \$_____ as Mission Support, which is _____% of our 2018 projected regular giving by members.