

## Arkansas Conference Church Remittance Form

Fields marked with \* are required. Please remit only one (1) form for each month.

\*GCFA #: \_\_\_\_\_ \*Church Income For: \_\_\_\_\_  
 Month Year  
 \*Conference Church #: \_\_\_\_\_  
 \*Church Name: \_\_\_\_\_ \*Paid to Conference in: \_\_\_\_\_  
 Month Year  
 \*City: \_\_\_\_\_

\*District:  Central  Northeast  Northwest  Southeast  Southwest

<u>To Calculate Your Tithe:</u>	
<b>Total Gross Income</b> for previous month including designated giving and other funds	A*
<b><u>APPROVED Local Church EXCLUSIONS</u></b>	
Less income for <b>capital campaigns</b> (this <u>does not include</u> LOC/mortgage payments)	B
Less income for <b>memorials and endowments</b>	C
Less income from <b>sale of church-owned real estate</b> (not used for operation expenses)	D
Less income from <b>tuition-based services</b> (preschool, daycare, etc.)	E
Less <b>direct costs of fund-raising</b> (this <u>does not include</u> income raised)	F
Less income for <b>pass-through/outreach ministries</b>	G
<b>ADJUSTED GROSS INCOME</b> = Line A minus B, C, D, E, F, G	H*
Church <b>TITHE</b> Remitted to Conference (LINE H x 10%) =	I*
<b>District Apportionment</b> Remitted to Conference =	J*

OTHER DESIGNATED GIVING remitted to Conference at this time			
	Project Name	Code	\$Amount
To be sure that your funds are allocated properly, refer to the Project Code List for the correct Project Code #			
<b>TOTAL DESIGNATED GIVING Remitted to Conference</b>			K*

\*Date: \_\_\_\_\_ Check#: \_\_\_\_\_ Total Check Amount   I+J+K  
 \*Prepared by: \_\_\_\_\_  
 \*Phone: \_\_\_\_\_  
 \*Email: \_\_\_\_\_  Check this box if form was submitted online

Please keep a copy for your records

**\*Required information**

**If you have questions, contact Wendy Brunson Daniels - wbrunson@arumc.org**

Make checks payable to: **Arkansas Conference UMC**  
**P.O. Box 55588**  
**Little Rock, AR 72215**