Report Form for
Gift Cards
"Miracles for Missionaries"

Name of Church_____
City_____State _____Zip_____
Person Reporting_____Phone Number_____

Please list all the individual gift cards/certificates that your ladies have purchased. Your church will receive **CASH SPENT--District** credit for the total. You may include these amounts on your quarterly statements.

If your ladies prefer to send a check, please make the check out to NJDC, PO Box 100, Burlington, NJ 08016.

STORE	**AMOUNT**
TOTAL $	

Thank you for your supporting the Missionaries of New Jersey