

# MISSOURI BAPTIST CONVENTION CHURCH REMITTANCE FORM

*Please reproduce this form as necessary*

\_\_\_\_\_ Church  
 \_\_\_\_\_ Association

Date \_\_\_\_\_

## Cooperative Program Missions Giving

Effective January 1, 2010, a church may choose to contribute through the Cooperative Program (CP) by choosing one (or both) of the following plans identified as CP Plan A or CP Plan B. Both plans will be considered Cooperative Program. Other special offerings and designations need to be separated out below. If you need assistance completing this form, call the MBC Business Services Team, 1-800-736-6227.

**Please make all checks payable to: Missouri Baptist Convention, 400 E. High Street, Jefferson City, MO 65101**

### CP Plan A

Fund #11 (Internal Use)

Amount ..... \$ \_\_\_\_\_

Gifts given to CP Plan A will be allotted based on the following:

- Southern Baptist Convention.....36.75%
- Missouri Baptist Convention Causes
  - The Children's Home..... 2.85%
  - Christian Higher Education .....12.00%
  - Agency Restoration..... 3.00%
  - Executive Board Budget/SBC Annuity & Ins.....45.40%
- Total Missouri Baptist Causes.....63.25%

### CP Plan B

Fund #12 (internal Use)

*An alternative plan of giving determined by official Church action.*

Amount ..... \$ \_\_\_\_\_

Gifts given to CP Plan B will be allotted based on the following:

- Southern Baptist Convention.....36.75%
- Missouri Baptist Convention Causes
  - The Children's Home..... 3.85%
  - Christian Higher Education.....14.00%
  - Executive Board Budget/SBC Annuity & Ins.....45.40%
- Total Missouri Baptist Causes.....63.25%

## Special Offerings and Designations

Fund # (internal use)

- 20 Missouri Missions/Rheubin South Offering ..... \$ \_\_\_\_\_
- 30 Annie Armstrong Easter Offering – NAMB ..... \$ \_\_\_\_\_
- 34 Lottie Moon Christmas Offering – IMB ..... \$ \_\_\_\_\_
- 36 World Hunger ..... \$ \_\_\_\_\_
- 41 Birthday Offering – Children's Home ..... \$ \_\_\_\_\_
- 43 Anniversary Offering – Children's Home ..... \$ \_\_\_\_\_
- 70 Madge N. Truex – WMU ..... \$ \_\_\_\_\_
- Other ..... \$ \_\_\_\_\_
- Other ..... \$ \_\_\_\_\_

Total Amount Enclosed ..... \$ \_\_\_\_\_

Church Address \_\_\_\_\_

\_\_\_\_\_

**Thank you for supporting the Cooperative Program**  
*If neither Plan A nor Plan B are selected, the CP contributions will be considered to be Plan A contributions.*