

NORTHSTAR
CHURCH NETWORK

Contributions and Payments Form

Support of the Network's Regular Ministry Budget \$ _____
Monthly contributions are suggested

Designations:

Dorothy Allport Network Missions Offering _____

Church Planting _____

Language Ministries _____

Other Gifts (specify) _____

Fees or other payments (specify) _____

Date _____

Total \$ _____

Church _____

Address _____

City _____ State _____ Zip _____

Email for Contribution Statements: _____

Make all checks payable to:
NorthStar Church Network
405 N. Washington St., Suite 310
Falls Church, VA 22046

All gifts will be disbursed exactly as listed.
04/24