

BETHESDA TEMPLE CHURCH of the APOSTOLIC FAITH, INC.

5401 Bishop J. A. Johnson Lane, Normandy • Missouri 63121
(314) 382-5401 Office • (314) 382-7850 Fax

DISTRICT ELDER JULIAN R. JOHNSON, PASTOR

CONTRIBUTION STATEMENT REQUEST FOR 2019

Members of Bethesda Temple Church, who wish to receive a statement of your 2019 contributions for tax filing purposes, please complete the form below. **Please give your completed form to Sister Reba E. Dabney or Deacon Malcolm Townsend III or it may be placed in the offering plate during offertory.**

PLEASE PRINT

Last Name _____ First Name _____ MI _____

Spouse First Name _____
(If filing jointly)

Address _____

City _____ State _____ Zip Code _____

Telephone Number (____) ____ - ____

Note: Please complete any name and or address changes below if applicable during 2019

Last Name _____ First Name _____ MI _____

Old Address _____

City _____ State _____ Zip Code _____

General Free Will Offering (**donations not placed inside an envelope**) \$ _____
(This amount may be estimated)

Signature _____

If additional information is needed, you may contact the church office.

Deacon Malcolm Townsend III

Business Administrator

RED/2019