

2020 Kentucky East District: Our District Covenant

Pastor: _____

Month(s): _____

Charge: _____

Church: _____

Treasurer: _____

Phone: _____

Address _____

Email _____

I. Calculation of your church's portion of the District Mission Covenant

A. Total income received this month _____

Include in Line I A all income received including offering, other Operating income, Sunday School offerings, building funds, Capital improvement income, etc.

B. Less Excluded Items _____

Exclude from Line I B funds spent for debt retirement, funds received for capital improvements, funds spent for capital improvements if not previously listed as funds received for capital improvements, funds received for Advance Specials, United Methodist Special Day Offerings, and Fifth Sunday offering for the Methodist Home

C: Total Income Received this month for operations and programs _____

D: Multiply Line "C" by 1.5% _____

(this is your church's share of the KY East District Mission Covenant)

II. Send this Form and your Check to:

**Kentucky East District
227 West Main Street
Morehead, KY 40351**