



# Lutheran Woman's Quarterly NWD LWML Subscription Form

The number of *Quarterly* subscriptions paid for by the District LWML shall equal the number of mite-giving members in each society, plus an additional 25%, if requested, with a maximum of 15 extra copies. We encourage societies, who are able, to pay toward the cost of these subscriptions.

Subscription rates are: **1-9 Individual Subscriptions - \$7.50 per year**  
**10 copies or more to one address - \$6.00 per year**

**COMPLETE AND SEND TO THE DISTRICT CORRESPONDING SECRETARY:** *Laura Andersen*  
*47 20th Street*  
*Clear Lake, WI 54005*

**AND DISTRICT FINANCIAL SECRETARY.** Make a copy for your society files.



**TO THE DISTRICT CORRESPONDING SECRETARY**

Zone \_\_\_\_\_  
Society Name \_\_\_\_\_  
Church Name \_\_\_\_\_  
Church Address \_\_\_\_\_  
PO Box \_\_\_\_\_  
City \_\_\_\_\_  
State \_\_\_\_\_ Zip \_\_\_\_\_  
Church Phone Number (\_\_\_\_\_) \_\_\_\_\_  
Pastor's name \_\_\_\_\_

***Lutheran Woman's Quarterly* Information**

**Number of subscriptions needed** \_\_\_\_\_

PREFERRED PRACTICE:

Send to the church address, ATTN: \_\_\_\_\_

Send to: Name \_\_\_\_\_

Address \_\_\_\_\_

PO Box \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone (\_\_\_\_\_) \_\_\_\_\_



**TO THE DISTRICT FINANCIAL SECRETARY**

Zone \_\_\_\_\_  
Society Name \_\_\_\_\_  
Church Name \_\_\_\_\_  
Church Address \_\_\_\_\_  
PO Box \_\_\_\_\_  
City \_\_\_\_\_  
State \_\_\_\_\_ Zip \_\_\_\_\_  
Church Phone Number (\_\_\_\_\_) \_\_\_\_\_  
Pastor's name \_\_\_\_\_

***Lutheran Woman's Quarterly* subscription money**

Enclosed please find a check made out to:  
**North Wisconsin LWML**, in the amount of  
\$ \_\_\_\_\_ to cover the cost of  
\_\_\_\_\_ *LW Quarterly* subscriptions.

We have sent our subscription information to the District Corresponding Secretary.

Mail with payment to:  
NWD LWML Financial Secretary  
Sharon Kautzman  
234526 County Rd O  
Wausau, WI 54401