



River City Faith Network of the Richmond Baptist Association
2828 Emerywood Parkway, Richmond, VA 23294

Remittance Form

Please complete this form to specify how you want your gift to River City Faith Network to be credited. **Undesignated funds will go toward the General Ministry of RCFN.**

Download the form at www.richmondbaptist.org or give securely online by clicking the "DONATE" tab. Contact the RCFN office (office@rbaonline.org or 804-329-1701, ext. 101) for more information.

Name: _____
(Church, Organization or Individual)

Contact Name: _____ Phone: _____
(If different than above)

Address or E-mail: _____

Date of Remittance: _____ Total: \$ _____

Please check all that apply to this gift

- RCFN General Ministry..... \$ _____
- RCFN Missions Offering..... \$ _____
- Camp Alkulana..... \$ _____
- Church Hill Christian Wellness Center..... \$ _____
- Oregon Hill Baptist Cener \$ _____
- South Richmond Baptist Center..... \$ _____
- Other _____ \$ _____
(Please specify the recipient/purpose of your gift)
- Other _____ \$ _____
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Your gift to RCFN makes every ministry of RCFN possible. Thank you!