## DISTRICT AFFILIATED CHURCH MONTHLY REPORT



	MONTH	<u> </u>	
CHURCH NAME			
	CITY		
PASTOR			
	FINANCIAL REPORT		
(Date)	Balance Brought Forward	\$ (Amount)	
Receipts: Tithe & Offerings Missions			
Building Other			
	Total Receipts	\$	
	Total	\$	
Disbursements: Pastor's Salary Pastor's Housing Pastor's Insurance Supplies Utilities Rent/Mortgage/Loan Payment AZ District 2% Fund Camp Fund 1% World Missions US/AZ Missions			
	Total Disbursements  Balance on Hand	\$	
<u>Designated Fund Balances</u> : Building	Daiance on Hand	<u>\$</u>	
Missions Other Savings Account			

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ATTENDANCE REPORT – AVERAGE ATTENDANG	CE	
Sunday School S	unday A.M	
Sunday P.M N	lidweek	
INSU (Insurance is mandatory. Please p	JRANCES provide below the required informa	ation.)
Name of carrier and most current date of coverag	e for each listed below:	
Property (buildings and contents) Vehicles Liability Workers Comp		
ADDITIONAL INFORMATION		
(Report Special Events, Revivals, People Saved, and Progress, Community Outreach, etc.)	Filled With Holy Spirit, Water Bapt	
·		
Name (Please Print)	Position	Date
_	Signature (Required)	

THIS PAGE MUST ACCOMPANY YOUR REPORT, WHETHER USING PAGE ONE OF THIS FORM OR SENDING COMPUTER PRINTOUTS OF CHURCH FINANCIAL INFORMATION.