

Church Report Form

PAC District Affiliated Home Missions *(Your church classification)*

Month _____ 20_____

Church Name _____

City _____

Pastor _____

Average Attendance

Sunday AM _____

Sunday PM _____

Mid-Week Service _____

FINANCIAL REPORT

<u>RECEIPTS</u>	
General Fund	
Special Offerings/Projects	
Missions	
Assistance from other Sources (gifts)	
Assistance from District	
Special Services/Activities	
Other	
TOTAL RECEIPTS	

<u>DISBURSEMENTS</u>	
Pastor's Salary	
Pastor's Housing Allowance, (other non-taxable)	
Mortgage Payment or Rent	
Missions	
Past Due Accounts	
Utilities	
Insurance	
Equipment Furniture, etc.	
Improvements building/property	
Other (List)	
TOTAL DISBURSMENTS	

Church Report Form

BANK ACCOUNT INFORMATION	CHECKING	SAVINGS
Bank Balance First of Month		
Deposited During the Month		
Checked out OR withdrawn during Month		
BANK BALANCE END OF THIS MONTH		

DOES THE CHURCH HAVE ADEQUATE INSURANCE AND IS IT CURRENT?

YES NO

COMMENTS OR PRAISE REPORT:

QUESTIONS OR CONCERNS:

This report submitted by:

This report reviewed and approved for submission by Pastor?

YES NO

Date:
