

Monthly Church Treasurer's Report

Local Church: _____

For the month of _____

Union/Field: _____

Tithe	
First Fruits	
Poor Fund	
Sabbath School Fund	
Canvassing Department	
Education Department	
Missionary/Evangelism Department	
Family Department	
Good Samaritan	
Health/Medical Missionary Department	
Ministerial Department	
Multimedia Department	
Literature/Publishing Department	
Youth Department	
Building Fund*	
Miscellaneous	
Field Fund	
Other _____	
Other _____	
	-

*Send only if not collected for specific building project(s)

Offerings to be forwarded to the GC in full

Foreign Missions	
Week of Prayer	
Good Samaritan	
Special SS for (name) _____	
Special SS for (name) _____	
Other _____	
	-

	Amount sent	Date sent/transferred
On (date), payment was sent via (<i>check one</i>)	_____	_____
<input type="checkbox"/> Transfer (bank name) _____		
<input type="checkbox"/> Check (number) _____		
<input type="checkbox"/> Cash credits (formerly debit-credit)		Treasurer's Name/Date
<input type="checkbox"/> Cash entrusted to (name) _____		Treasurer's Signature