



Florida General Baptist Convention, Inc.

Women's Department

Mrs. Patricia T. Carter, President

OFFICIAL COMMITTEE / MINISTRY or GROUP REPORT

(District/Local Mission Presidents - Please Use when Reporting Money for Multiple People or Churches)

Department: Women's Young Women Young Pastor's Wives Min. Wives/Widows

(Please check only ONE Department)

Date: _____

Session: _____ Location of Session: _____

Committee / Ministry: _____

Person Submitting Report: _____ Title: _____

Telephone: () _____ Email: _____

Church or District Association Reporting: _____

Pastor or Moderator or District President: _____

(Please Underline Which ever is Appropriate)

Address: _____ City / Zip: _____

Telephone: () _____ Email: _____

(If one check is used to pay for multiple people/churches, please list check number for each person/church included in check)

CHURCH / INDIVIDUAL PASTOR ADDRESS CITY/ZIP AMOUNT CK# or CASH

1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					

(Office Use Only)

Finance Staff Signature: _____ No. of Chks: _____ Amount: \$ _____ Cash: _____

White Copy - Hdqtrs. Office

Keep Copy for Receipt

Revised 2/10