

NORTH CAROLINA WOMEN'S MINISTRIES REPORT

District: _____
 Church: _____

Quarter: _____ thru _____
 Annual: _____ Year _____

Director _____
 Address _____
 City/ State _____
 Telephone _____
 E-mail Address _____

Sec/Treas _____
 Address _____
 City/State/Zip _____
 Telephone _____
 E-mail Address _____

Members: Beginning _____ Close _____ Deceased _____
 Number Meetings _____ Avg. Attendance _____
 Local WM Project _____

WM Ministry Group (List)

Estimated Value commodities for:
 Children's Home _____
 Home for Aged _____
 Church Schools _____
 Other _____

Balance Brought Forward _____

Receipts:
 Sales _____
 *Amount Profit from Sales _____
 *Offerings/Dues _____
 *Local Project (Tithes on * Receipts) _____
 Conference Project _____
 Christmas Missions _____
 Missionary Sponsor Plan _____
 Other Missions Funds _____
 General Project _____
 Church Schools _____
 King Scholarship Fund _____
 Carmen Home for Aged _____
 Falcon Children's Home _____
 Children's Center _____
 Invited Speakers _____
 WM Founder's Day _____
 Miscellaneous _____
Total Receipts _____

Expenditures:

Tithes to Conference _____
 Local Project _____
 Conference Project _____
 General Project _____
 Christmas Missions _____
 Missionary Sponsor Plan _____
 (List names/designation on reverse side)
 Other Missions Funds _____
 List _____

 Carmen Home _____
 Church Schools _____
 List Emmanuel _____
 Holmes _____
 King Scholarship _____
 Falcon Children's Home _____
 Children's Center _____
 WM Founder's Day _____
 Community Ministries _____
 Gifts for Pastor / Family _____
 Miscellaneous _____
Total Expenditures _____

Total Receipts Plus _____
 Balance Forward _____

BALANCE IN TREASURY _____

Total Expenditures _____
 Plus Balance _____

Submit original copy to NCWM Sec/Treas.
 Send copy to NCWM Director
 Give copy to local Director
 Keep copy in File.

Quarterly due 15th of month following quarter.
 Annual due January 15th of following year.