THIS FORM TO BE COMPLETED BY THE SECRETARY ON FRIDAY OF EACH WEEK AND SUBMITTED TO THE PASTOR BY SATURDAY MORNING.

Date: _____

Balance Last Fri.: _____

Total Offering This Week: _____

_____

_____

Checks Paid___	**Amount**	**Paid To**

New Balance: _____

Submitted By: _____

Bills Not Paid:	**Amount**	**To/For**	**Due Date**