

THIS REPORT IS DUE IN SEVEN (7) DAYS FOLLOWING THE DATE OF THE EVENT

BEREAN BAPTIST CHURCH

EVENT NAME: _____

DATE OF EVENT _____

CHECK NO: _____ AMOUNT ADVANCED _____

EXPENSES: (Receipts Attached)

_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

TOTAL EXPENSES: \$ _____

AMOUNT OWED CHURCH: \$ _____

AMOUNT OWED MEMBER: \$ _____

PREPARED BY: _____

DATE: _____

MINISTRY TRUSTEE APPROVAL: _____

DATE: _____