

**PASTOR'S MONTHLY REPORT TO STATE OVERSEER**  
**Thanks for sending your report in no later than the 5th of each month.**

Name

\_\_\_\_\_

Total Membership

\_\_\_\_\_

Ministers ID License #

\_\_\_\_\_

Average Attendance

\_\_\_\_\_

Month/Year

\_\_\_\_\_

Children's Ministry

Active

Inactive

Sermons

\_\_\_\_\_

Children's Ministry Average

\_\_\_\_\_

Converted

\_\_\_\_\_

Youth Ministry

Active

Inactive

Sanctified

\_\_\_\_\_

Received Holy Ghost

\_\_\_\_\_

Youth Ministry Average

\_\_\_\_\_

Water Baptized

\_\_\_\_\_

Report Comments

Added to Church

\_\_\_\_\_

\_\_\_\_\_

Homes Visited

\_\_\_\_\_

\_\_\_\_\_

Tithes Received

\_\_\_\_\_

\_\_\_\_\_

Offerings Received

\_\_\_\_\_

\_\_\_\_\_

Tithe paid to Local Church

\_\_\_\_\_

\_\_\_\_\_

Tithe to State Office

\_\_\_\_\_

\_\_\_\_\_