

Mount Zion Missionary Baptist Church

Monthly Ministry Finance Report

MINISTRY: _____

Month Reporting: _____

Beginning Balance: _____

Amount Collected: _____

Amount Paid Out: _____

Ending Balance: _____

President/Treasurer _____

Date: _____

Administrator/Clerk

Signature: _____

Date Received: _____

**** Reports must be submitted by the first Sunday of the
month.**