

RESTORED LIFE MINISTRIES

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Springfield, Ohio 45506

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PLEASE CHECK ONE

EXECUTIVE COUNCIL

CHURCH BUSINESS MEETING

DATE _____ **MINISTRY NAME** _____

REQUEST/REPORT _____

[illegible]

GENERAL FUND

ESCROW

TOTAL FOR MONTH_____

TOTAL TURNED IN _____

TOTAL IN TREASURE _____**CHAIRPERSON** _____

SECRETARY _____

TREASURER _____

PASTOR _____

JANUARY 4, 2026