



USHER BOARD FINANCIAL REPORT

PLEASE FILL OUT THIS FORM COMPLETELY.

Please make checks payable to: Georgia State Council Usher Board Auxiliary.

Church Name: _____

Street Address and/or P.O. Box

Pastor: _____
City, State & Zip Code

Usher President's: _____
Name **Street Address and/or P.O. Box**

City, State & Zip Code

Phone: **Home:** _____ **Cell:** _____

Email: **Personal:** _____

*****PLEASE ATTACH MEMBERSHIP INFORMATION ON ALL USHERS. UPDATE AS NEEDED. THANKS.*****

Number of Ushers: _____ **X \$15.00 (FEBRUARY) = \$** _____

Number of Ushers: _____ **X \$15.00 (JUNE) = \$** _____

Church Report (EACH COUNCIL) \$25.00 = \$ _____

WAYS 'N MEANS REPORT (SPECIAL CONVENTION OFFERING)= \$ _____

(Examples: Patron's List, Donations, Saving Dollars, etc.) See Attached.

STATE PRESIDENT LOVE OFFERING \$25.00 = \$ _____

TOTAL REPORT: \$ _____

Submitted by: _____, **President/Designee**