

Grant African Methodist Episcopal Church
10435 South Central Avenue
Los Angeles, California 90002
323-564-1151

Official Board Report (Monthly Report)

Date: _____

Reporting for month(s) of: _____ **Organization:** _____

Chairperson/President: _____ **Treasurer:** _____

Financial Report

Balance from last report: \$ _____

Income Source _____ \$ _____

Income Source _____ \$ _____

Income Source _____ \$ _____

Sub Totals: \$ _____

Disbursement _____ \$ _____

Disbursement _____ \$ _____

Disbursement _____ \$ _____

Disbursement _____ \$ _____

Total Disbursements: \$ _____

Balance in Treasury: (balance forward + income-disbursements) \$ _____

Literary Report

Organization Membership: _____ New Members: _____ Active Members: _____

Activities Held:

Planned Projects:
