

ANNUAL REPORT OF THE AREA ALLIANCE WOMEN MINISTRIES

For Conference Year July 1, 20___ to June 30, 20___

_____ Area

NAME & ADDRESS of Area Director: _____

Phone: _____

E-mail: _____

of AW Groups in Area: _____ # of Groups Reporting: _____ # of Churches in Area: _____

List Alliance Women's Groups in Area: *(Use additional page, if needed)*

List Alliance Churches in Area without Alliance Women's Group: *(Use additional page, if needed)*

I. MINISTRIES REPORT

A. LOCAL – (Combined Total of Local Meetings)

1. **Alliance Women Monthly Meetings** Aggregate Average Attendance: _____
(ADD up all local average attendance figures together. Don't divide.)

2. **Fellowship Meetings**
Number of Meetings: _____ Aggregate Average Attendance: _____

3. **Outreach Events**
Total Number of Decisions Made: _____
Number of Events Held: _____ Total Attendance: _____

4. **Missions Events:**
Work Days – Aggregate Average Attendance: _____
Number of Other Events Held: _____ Total Attendance: _____

5. **Prayer Groups:**
Number of Groups Held: _____ Aggregate Average Attendance: _____

Estimated number of women attending your Area churches: _____

Number of Area women who participate in Alliance Women Ministries: _____

B. AREA

1. **Area Events**
a. Number of events held in your Area _____ Total Attendance: _____
b. Total offerings at all events \$ _____

2. **Other**
a. How many Alliance Women local groups did you visit? _____
b. Did you invite your District President to an event? _____
c. Do you collect an annual area expense fund fee? _____
If so, how much per group? \$ _____

II. FINANCIAL REPORT

This should include ALL gifts/offerings given through Combined Local Alliance Women.

A. Pledge to Great Commission Fund - Amount Paid \$ _____

B. Alliance Overseas Missionary Aid

 Outfit Calls..... \$ _____

 Other outfits/gifts/approved specials \$ _____

 Supply center (value of items GIVEN) \$ _____

 Adopted MK's gifts \$ _____

 MK School/Guest Home gifts \$ _____

 (Local giving; do not count rally offerings)

 Other \$ _____

TOTAL ALLIANCE MISSIONARY AID..... \$ _____

C. Alliance Intercultural Ministries Aid..... \$ _____

D. National Alliance Women Annual Project \$ _____

E. Approved District Projects \$ _____

F. Approved Local Projects \$ _____

G. Work Day Projects . Cost of materials, supplies \$ _____

H. Speakers' Expenses . Total all honoraria, travel, gifts, etc \$ _____

I. Operating Expenses . Postage, office supplies, etc..... \$ _____

J. Annual Expense Fund Fees

 National Expense Fund..... \$ _____

 District Expense Fund \$ _____

 Area Expense Fund..... \$ _____

Total Annual Expense Fund Fees \$ _____

K. Non-Alliance Missionary Offering, Gifts, etc..... \$ _____

L. Other \$ _____

GRAND TOTAL OF ALL FIGURES FROM "A" THROUGH "L" \$ _____

- This report represents response from the following churches: *(use an additional page, if needed)*

- Complete report forms and return to your District Director no later than _____
- Retain one copy for your files

Reporting Year: _____

