

## NEW YORK, PENNSYLVANIA NEW ENGLAND STATES COUNCIL

## MISSIONARY AUXILIARY REPORT BLANK



DATE: \_\_\_\_\_

SECTION 1: Church Information				
		Tolonhono #		
1.	Church Name	Telephone #		
	Mailing Address			
2.	Pastor's Name	Telephone #		
	Pastor's Address			
3.	Name of Local Chairperson	Telephone #		
	Chairperson's Address			
4.	4. Name of Representative attending this council			
SECTION 2: Auxiliary Activity (since the last council) and/or Remarks				
1	Number of Active Members			
		mes		
	9	<u></u>		
	<u>-</u>	ons		
5.	<b>Number of Tracts and/or Literature Items</b>	S Distributed		
6.	Clothing Given (bags)	(boxes) or (items)		
7.	Benevolent (Money Given) Am	ount		
8.	Number of Prayers: Missionary	Prayer BandOther Prayers		
Rema	rks:			
CECTION 2. March C. L. W. I				
SECTION 2: Auxiliary Activity (since the last council) and/or Remarks  1. Number of Active Members 2. Number of Visits to Homes of Nursing Homes 3. Number of Visits to Hospitals 4. Number of Visits to Shelters, Joils or Prisons				
1.	Love Offering to the Council Missionary	Auxiliary \$		
2.	•	<u>-</u>		
3.	,	ack)		
4.	•			
5. 6.	·	<u> </u>		
υ.	TOTAL ANIOUNI SUDMITTED	Ψ		

## **SECTION 4:**

## MISSIONARY AUXILIARY REGISTRATION

\$1.00 per person (please list name of each person registering)

	\$1.00 per person (piease usi name of each person registering)	
1	26	
2	27	
3	28	
4	29	
5	30	
6	31	
7	32	
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11	36	
12	37	
13	38	
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25	50	