# NC WOMEN’S MINISTRIES ANNUAL REPORT 2017

January 1, 2017 through December 31, 2017

#### General Information

## Church Name Mailing Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## City, State, Zip

Report prepared by: Telephone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail:

## Mailing List Information

## Women’s Ministries Coordinator: (This is a change from previous year \_\_\_\_yes \_\_\_\_no)

Address

Telephone (home) (cell or work) (only if permissible to call)

E-mail:

\*\*\*On a separate sheet, please list any additional leadership team members (name & email) to receive e-newsletters.

**2017 Membership & Ministry Report**

Please list all ministry groups that are an extension of your local Women’s Ministries efforts. Include Bible Studies, prayer groups, MOM’s groups, Outreach Teams, Special Helps, etc. If you only have one group that meets on a regular basis, list that information here.

 **Average Participation**

### Group Name Function Per Meeting Meeting Frequency

(Use additional sheet if necessary)

Total number of women involved in some aspect of Women’s Ministries \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you have a joint meeting of all the women, in addition to ministry/interest groups? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If so, how often? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Souls saved through Women’s Ministries programs/outreaches\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Persons filled with the Holy Spirit through Women’s Ministries programs/outreaches\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Did you participate in the Adopted Missionary Program for 2017?\_\_\_\_\_\_\_\_ If yes, please provide the following:

Missionary Name: Country:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Communication this year: Email/cards/packages sent:\_\_\_\_\_\_\_\_\_\_\_\_\_ Email/cards/packages received:\_\_\_\_\_\_\_\_\_\_\_\_

### 2017 Women’s Ministries Financial Report

|  |  |  |  |
| --- | --- | --- | --- |
| Area of Giving | **Name of Missionary,****Institution, or Other Project** | Cash Given(see definition below) | Cash Spent(see definition below) |
| World Missions\*\*\*(see note below)Include gifts to World Missionaries and families, overseas Bible Schools and other World Missions institutions; also include honorariums given to World Missionaries who spoke at local Women’s Ministries events. |   |  |  |
| US MissionsInclude gifts to US Missionaries and families, Bible schools and other special ministries under US missions department. Include gifts to NC Church Planters and families. Include honorariums given to US Missions Speakers for Women’s Ministries events. |  |  |  |
| Compassion MinistriesInclude gifts to National Compassion projects such as Sole Mission, Family Services Agency, Disaster Relief, Convoy of Hope, Aged Ministers Assistance, and Maranatha Manor. |  |  |  |
| District\*\*\*\*(see note below)Include Tithes and/or offerings to District and Section; Include Honorariums given to District Speakers (WM Director, MPact Coordinator) |  |  |  |
| LocalProjects for the local church and community. Include honorariums given to local speakers. (see below for further description) |  |  |  |
| Samaritan’s Purse (or other similar projects not associated with Assemblies of God World or US Missions-please identify each project) |  |  |  |

Thank you for completing this annual report. Please contact the North Carolina Women’s Ministries Department if you have any questions. You may contact us at 919.965.0225, extension 231, or ahoggard@ncag.org.

## Information for Completing Women’s Ministries Annual Report

**CASH GIVEN COLUMN:** The amount of *actual cash given* through honorariums or other offerings to a missionary, speaker, institution. Also include amount given as district Women’s Ministries tithe or offering. Enter these amounts in the space opposite the appropriate area of giving (such as World Missions, Compassion Ministries, District, Local, etc.)

**CASH SPENT COLUMN:** The amount of *actual money spent* for purchase of gifts, cards, supplies, literature, postage and shipping, etc. Enter these amounts in the space opposite the appropriate area of giving (such as World Missions, Compassion Ministries, District, Local, etc.).

**LOCAL CATEGORY:** Enter the amount of cash given or cash spent (as explained above) for projects within your local church and community. This would include cash given or spent for the parsonage, gifts for the pastor’s family, honorariums given to local (church or community) speakers. Also, enter cash given or cash spent for literature and Bibles distributed locally; community benevolences such as food for the needy, bereaved, emergency assistance (such as for a family whose home has burned). Do NOT report food purchased for a local church or regional Women’s Ministries fellowship, meeting, or rally. Do NOT report food and supplies purchased for wedding or baby showers.

**\*\*\*\*DO NOT REPORT MONEY GIVEN TO THE TOUCH THE WORLD PROJECT\*\*\*\***

**This amount is reported in another way and would be a duplication if included on this report.**