



Girls Clubs Local Monthly Report

Office Use Only

Date _____
 Amount \$ _____
 Check # _____
 Translation \$ _____
 GOAM \$ _____
 YWEA \$ _____
 Orphanages \$ _____

Check if address changed this month.

Mail Report

All Girls Clubs reports must be postmarked by the 5th of each month and mailed to your **STATE OFFICE**.

Month _____
 Year _____

Check the club for which this report is being made.

LS BB JB YLM

Name of Church _____

City _____ State _____ Zip _____ Church No. _____

No. of meetings	_____
Total attendance	_____
No. of prayer mothers	_____
No. working on Curriculum	_____
No. working on Merit Study	_____
No. of women receiving <i>Insight</i>	_____
No. of socials or service projects	_____

List social activities and service projects in which your Girls Clubs participated this month on a separate sheet of paper or on back of report.

(See clarifications and explanations on front cover for examples.)

MISSIONS ENCLOSED:

Translation of Literature \$ _____
 Girls On A Mission \$ _____
 YWEA \$ _____
 Orphanages \$ _____

Name of Mentor _____
 Phone _____
 Address _____
 City _____
 State _____ Zip _____
 Secretary/Treasurer _____