

# FLORIDA COCOA STATE YOUTH CONVENTION 2019 FINANCIAL REPORT

Church Name: \_\_\_\_\_

Pastor's Name: \_\_\_\_\_

Date: \_\_\_\_\_

District: \_\_\_\_\_

PASTORS ARE TO COLLECT THE FOLLOWING ASSESMENTS:	ASSESMENTS AMOUNT	AMOUNT COLLECTED
<b>SUNDAY SCHOOL</b>	<b>\$20.00</b>	
<b>FAMILY TRAINING HOUR</b>	<b>\$10.00</b>	
<b>LAY MEMBER</b>	<b>\$5.00</b>	
<b>YWEA</b>	<b>\$50.00</b>	
<b>YOUTH DIRECTOR</b>	<b>\$100.00</b>	
<b>GIRLS COORDINATOR</b>	<b>\$50.00</b>	

**Do Not Write In This Space  
For Secretary Use Only! :**

Paid by: Check # \_\_\_\_\_ Cash \$ \_\_\_\_\_ Received by: \_\_\_\_\_