

REGIONAL PRESBYTER MONTHLY REPORT
South Carolina Church of God of Prophecy

Month/Year _____

Region # _____ **Regional Presbyter:** _____

_____ Number of Churches in Region

_____ Number of Missions in Region

_____ Number of New Fields Works in Region

_____ Number of Churches Visited

_____ Number of Ministers Visited

_____ Regional Activities (Please Describe) _____

REGIONAL PRESBYTER EXPENSE REIMBURSEMENT

(Please provide receipts for listed expenses to receive reimbursement – up to \$50 per month)

Food _____

Gas _____

Other _____

Total _____

Comments / Remarks:

