



Women's Home and Overseas Missionary Society
African Methodist Episcopal Zion Church

FIELD WORKERS QUARTERLY REPORT FORM

Date _____

FIELD WORKER _____
 CONFERENCE _____
 BISHOP _____
 MISSIONARY SUPERVISOR _____
 NUMBER OF PRESIDING ELDER DISTRICTS _____ NUMBER OF CHURCHES _____

WOMEN'S HOME AND OVERSEAS MISSIONARY SOCIETY

DEPARTMENT	NUMBERS OF SOCIETIES	NEW MEMBERS	TOTAL MEMBERS
PARENT BODY			
YAMS(Age 22-40)			
YOUTH(Age 13-21)			
BUDS OF PROMISE			
OVERSEAS SUPPLY			
LIFE MEMBERS			

New Life Members _____ Honorary Life Members _____ Total _____
 Life Matrons _____ Life Patrons _____ Total _____

TOTAL LIFE MEMBERS COUNCIL FUNDS RECEIVED THIS QUARTER \$ _____
 PROJECTS FUNDS USED FOR: _____

NUMBERS OF MEETINGS HELD _____ DISTANCE TRAVELED _____

PLACES: _____

DATES: _____

PROGRAM: _____

SPECIAL PROJECTS FOR THIS QUARTER:

PROJECTED PLANS FOR NEXT QUARTER:

COMMENTS:

DATE LAST STIPEND RECEIVED _____ AMOUNT RECEIVED \$ _____

FORWARD COPY TO:

_____ General President _____ Executive Secretary _____ Missionary Supervisor