



LIGHTHOUSE MONTHLY FINANCIAL REPORT

Lighthouse _____ VP of Finance Dev _____ VP's email _____ Address _____ City, ST ZIP _____ Phone _____	EIN # _____ ID # _____ President _____ President's email _____ Month of Reporting _____
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	<u>UNRESTRICTED</u>	+	<u>RESTRICTED</u>		<u>TOTALS</u>
BEGINNING BALANCE IN BANK ACCOUNT (The ending balance from last month's report)					\$ -
INCOME					
Offering/Donations					
Book Sales					
Registrations/Fees					
Interest					
Other					
TOTAL INCOME	\$ -		\$ -		\$ -
EXPENSES					
Tithes/Donations					
Publication Purchases					
Facility Rent/Meals					
Travel/Food/Lodging					
Honorariums					
Printing/Postage/Supplies					
Love Gift to SPC					
Other					
TOTAL EXPENSES	\$ -		\$ -		\$ -
NET INCOME FOR PERIOD (Income Less Expenses)					\$ -
ENDING BALANCE IN BANK ACCOUNT	\$ -		\$ -		\$ -

Submitted by (Signature) _____ Date _____

Please submit this to your Area Team if they require monthly reports