



# Monthly Departmental Report Form

Please turn in at/or email before each Departmental Staff Meeting.

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

Department: \_\_\_\_\_

For the Month of: \_\_\_\_\_

## 1. Please List Your Location for Each Sabbath in the Preceding four (4) Weeks:

City:

Purpose for Which You Were There:

_____	_____
_____	_____
_____	_____
_____	_____

2. Total Number of Days You Were in the Office: \_\_\_\_\_

3. Number of Department Prayer Meetings Attended: \_\_\_\_\_

4. I Met With My Secretary This Month: Yes \_\_\_\_ No \_\_\_\_

5. How many Pastoral phone calls did you make this month: \_\_\_\_\_

6. Please list the pastors that you called this month:

\_\_\_\_\_

\_\_\_\_\_

7. The Number One Objective That the Lord Blessed Me to Accomplish This Month is:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_