

INDIANA STATE BROTHERHOOD CHURCH REPORT

Apostolic Bible Students Association (ABSA)

Date of Council Report _____

Name of Church _____

Address _____

Name of Chairman _____

Name of Pastor _____

Love Offering - Men's Ministry	\$ _____
Individual Registration	\$ _____
Church Registration	\$ _____
Love Offering – Chairman	\$ _____
IMMA Assessment	\$ _____
Special offering to ABSA Global (Foreign) Mission	\$ _____
Total	\$ _____

Church size Category: Small _____ Medium _____ Large _____

Make checks payable to: ABSA Men's Ministry

Mail Forms to:

DEACON BREAVERS (TREASURER)

5528 DEACATUR RIDGE DR.

INDIANAPOLIS, IN 46221