

**NORTH CAROLINA DISTRICT COUNCIL (NCDC)
PCAF INTERNATIONAL, INC.**

SUNDAY SCHOOL AUXILIARY REPORT BLANK

DATE: _____

Name of Church: _____

Address: _____

City: _____ State: _____ Zip Code: _____ Phone: _____

Pastor's Information:

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____ Phone: _____

Local Chairperson's Information

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____ Phone: _____

Local Church Activity Report

Members Enrolled: _____ New Members Since Last Council: _____ Visitors Since Last Council: _____

Love Offering to the Auxiliary (<i>suggested auxiliary offering – minimum of \$100.00</i>)	\$
Love Offering to the Superintendent	\$
Love Offering to the Assistant Superintendent	\$
Love Offering to the PCAF National Scholarship Fund	\$
Love Offering to Ways and Means	\$
Total Offerings with this Report	\$

Remarks:

Delegate: _____