

KASAMA CENTRAL CHURCH
TREASURY QUARTERLY REPORT - 2018Reporting period (please tick): **1st Quarter () 2nd Quarter () 3rd Quarter () 4th Quarter ()****Fill all information required for this quarter**

1. Number of Seminars/Workshops/Trainings conducted/attended _____

Area of Training _____

Number of Persons trained _____

2. Number of Departmental meetings Held _____

3. Purchase of filing cabinet done [] Yes [] No

4. Purchase of External Hard Drive [] Yes [] No

5. Purchase of Paper Shredder [] Yes [] No

6. Production of financial reports done [] Yes [] No

Dates reports presented to Board & Business:

1st Month _____ 2nd Month _____ 3rd Month _____

7. Provide member's participation to Stewardship department done [] Yes [] No

8. Promotion of use of tithe envelopes done [] Yes [] No If yes, when _____

9. Any Comments/Suggestions/Recommendations

Head Treasurer _____ Signed _____ Date _____

Elder in Charge _____ Signed _____ Date _____