

MDC ANNUAL AUXILIARY REPORT

Date of Report: _____ Auxiliary Name: _____

Auxiliary Director's Name: _____

President: _____

Vice Chair: _____

Secretary: _____

Treasurer: _____

Number of Meetings: _____

Number of Members Average attendance per meeting: _____

ACTIVITIES AND/OR ACCOMPLISHMENTS: (Evaluation of our work for this period)

What we did well

- 1.
- 2.
- 3.

Where we need improvement

- 1.
- 2.
- 3.

GOALS FOR NEXT YEAR (Plans or goals)

- 1.
- 2.
- 3.

PARTNERSHIP

How can the Council and/or Pastors help you to accomplish your goals for the next year?

- 1.
- 2.
- 3.

FINANANCIAL STATUS

Auxiliary Monies spent: _____

Auxiliary Account Balance: _____