

**Bethany Chapel Missionary Baptist Church
Deacon Board Ministry Quarterly Report**

Date: _____ **Church:** _____

MEMBERSHIP ACCOUNTABILITY:

Number of members: _____

Numbers of meetings held: _____

ACTIVITIES:

Training/workshops conducted and nature: _____

Number of members in attendance: _____

Special activities completed by Deacon Board: _____

Special activities planned by the Deacon Board: _____

STEWARDSHIP:

Amount received from Deacon Board Activities: _____

Amount disbursed: _____

For what purpose: _____

SPIRITUAL GROWTH:

Number of members attending Morning Worship: _____

Number of members attending Sunday School _____

Number of members attending Midweek Services: _____

Submitted _____, **Chairman**