

**WI DISTRICT NAM
NAM PASTOR'S MONTHLY REPORT**

Church Name: _____ City: _____

Pastor: _____ Pastor's Email: _____

Has any of your personal contact information changed in the past month? Yes No

If, yes, please provide current information: _____

Has any of the church information changed in the past month? Yes No

If, yes, please mark and update in the information that has changed:

Location of services: _____

Service schedule: _____

Staff members: _____

Month / year reporting for: _____ / _____

Have you spoke to your NAM rep this month? Yes No

Average Sunday attendance: _____ First time guests: _____ Repeat guests: _____

Water Baptisms: _____ Holy Ghost: _____ Number of active Bible Studies: _____

Has there been any significant change in the church finances in the past month: Yes No

If, yes, please explain: _____

Has there been any significant challenges PERSONALLY in the past month: Yes No

If, yes, please explain: _____

Victory Reports: _____

Prayer Needs: _____

Current Outreach Efforts: _____

Goals for the next month (Please be as specific as possible): _____

How can WI NAM assist you at this time? _____
