

Contribution Worksheet

Month/Year: ____/____



GID#: _____

Group Leader: _____

Group Type: ____ Men ____ Spouse ____ Women ____ Young Men

City, State: _____

Phone: (____) ____ - _____

Week 1

Group Members Present: _____

How many contributed? _____

Amount Received: \$ _____ ÷ 2 = \$ _____

Week 2

Group Members Present: _____

How many contributed? _____

Amount Received: \$ _____ ÷ 2 = \$ _____

Week 3

Group Members Present: _____

How many contributed? _____

Amount Received: \$ _____ ÷ 2 = \$ _____

Week 4

Group Members Present: _____

How many contributed? _____

Amount Received: \$ _____ ÷ 2 = \$ _____

Week 5

Group Members Present: _____

How many contributed? _____

Amount Received: \$ _____ ÷ 2 = \$ _____

Use for Group Expenses

Total Collected: \$ _____ ÷ 2 = \$ _____

\$ _____

Please return this amount to L.I.F.E. Ministries, with a copy of this Worksheet, to L.I.F.E. Ministries, PO Box 952317, Lake Mary, FL, 32795. If the recommended amount to send back to L.I.F.E. is \$50 or more, or you make it \$50 or more, your Support Group can be a L.I.F.E. Partner Group. You will be eligible to receive discounts on resources, and other Partner benefits. Visit www.FreedomEveryday.org/partners for more information.

Thank you for Giving Back! Your group's **investment in L.I.F.E. Ministries** is used to provide more resources to groups like yours as well as reach out to those hurting.