

**Mount Zion Baptist Church**  
**901 South Westover Boulevard, Albany, Georgia 31721**  
**BUDGET REQUEST FOR THE YEAR OF 2019**

(Form Revised September 27, 2018)

Auxiliary Name: _____	President Signature/Date: _____		
Ministry Name: _____	Ministry Leader Signature/Date: _____		
<b>REVENUE DESCRIPTION</b>	<b>Budget Year Projected Amount</b>	<b>Current Year Actual Amount</b>	
<b>Total Revenue</b>	\$	\$	
<b>EXPENSES DESCRIPTION</b>	<b>Budget Year Projected Amount</b>	<b>Current Year Actual Amount</b>	
<b>Total Expenses</b>	\$	\$	

All Auxiliaries are to complete this form, including transportation needs, and provide it to their Ministry Leader. The Ministry Leaders will review, finalize, and submit all of their ministry budgets to the Church Budget Committee by the required date.