

Mount Zion Baptist Church
901 South Westover Boulevard, Albany, Georgia 31721
BUDGET REQUEST FOR THE YEAR OF 2024

(Form Revised October 05, 2023)

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

All Auxiliaries are to complete this form in its entirety and provide it to your Ministry Leader. The Ministry Leaders will review, finalize, and submit all ministry budgets to the Church Budget Committee by Friday, November 10, 2023 at 5:00 PM.