

EXPENSE ANALYSIS (1-3 MONTHS)

Assemblies of God World Missions

Please report on this form how all retained funds (money given directly to you and not reported to AGWM) were spent). This form is due in the AGWM MAPS office immediately after the completion of your assignment (*no later than December 10 to be received in the current year*).

Name _____ Social Security No. _____ Date _____

College _____ College Team Member Intern

Permanent Address _____

City _____ State _____ Zip _____

Home Phone _____ College Phone _____

E-Mail _____

Place of Assignment _____

Dates of Assignment _____

Missionary/Pastor/Director Assigned To _____

Contributions Received

The white copy of all temporary receipts are required. Return all unused temporary receipts.

Total Contributions Received _____

Expenses

Receipts must be attached for ALL expenses.

Travel _____

Hotels and Meals _____

Passport, Visa, Vaccinations _____

Car Rental, Airport Parking, Taxi, etc. _____

Cost of meals while on assignment
(Daily log of meals required.) _____

Cost of room while on assignment _____

Other Expenses

Other Expenses
Please list

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Total Reportable Expenses for this Assignment _____

Excess Funds

If contributions exceed expenses (positive amount), then that amount must be returned to AGWM.

Attach a personal check made out to AGWM to this form. **If expenses exceed contributions** (negative amount), then check with your tax preparer to determine if this is deductible on your personal taxes.

Return form with enclosed check to: AGWM MAPS
1445 North Boonville Avenue, Springfield, MO 65802