Fiscal Year December 2019 – November 2020

MINISTRY RECOMMENDATIONS FOR LEADERS & CALENDAR ACTIVITIES

Ministry
__________________________________________________________

MINISTRY MISSION STATEMENT:
__________________________________________________________

**Officers and Staff:**

*Director/Superintendent/President/Advisor(s)*

*Assistant/Vice*

*Secretary*

*Treasurer (s)*

*Chaplin*

*Sergeant-at-Arms*

*Chief (s)*

*Choir Director(s) (s)*

*Instructors/Teachers (s)*

The following information will be placed on the 2020 Church Calendar: PLEASE be SPECIFIC.

**Monthly Meeting Date(s)** ________________________________ **Time(s)** __________

<table>
<thead>
<tr>
<th>Annual Day &amp; Events (s)</th>
<th>Date</th>
<th>Chairpersons</th>
</tr>
</thead>
<tbody>
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**Goals: (s)**

1. ________________________________________________________________

2. ________________________________________________________________

3. ________________________________________________________________

__________________________________________________________

Signature of Ministry Director

*attach additional sheets if necessary*
New Bethel Missionary Baptist Church  
7786 Poplar Pike  
Germantown, TN 38138  
Dr. Donald R. Ester, Sr. – PASTOR

DEPARTMENTAL BUDGET  
FY December 2019 – November 2020

<table>
<thead>
<tr>
<th>Ministry</th>
<th>Total Estimated Expenses</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Supplies/Materials</td>
<td>$ ___________</td>
</tr>
<tr>
<td>2. Workshops/Seminars</td>
<td>$ ___________</td>
</tr>
<tr>
<td>3. Annual Day</td>
<td>$ ___________</td>
</tr>
<tr>
<td>4. Activities (Health Fair, Festivals, Retreats, etc.)</td>
<td>$ ___________</td>
</tr>
<tr>
<td>5. Representation Fees (Conferences, Congress, etc.)</td>
<td>$ ___________</td>
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</tbody>
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TOTAL ESTIMATE $ ___________

NOTE: Food IS NOT A BUDGETED ITEM.  
Food will be provided by the church for ANNUAL DAYS ONLY.

Comments/Concerns: (information provided here will be reviewed by the Trustees)
New Bethel Missionary Baptist Church
Departmental Budget Worksheet

Explanation of Line Items

1. Supplies/Materials: ___________________________________________
   ___________________________________________
   ___________________________________________
   ___________________________________________
   ___________________________________________

2. Workshops/Seminars: ___________________________________________
   ___________________________________________
   ___________________________________________
   ___________________________________________
   ___________________________________________
   ___________________________________________
   ___________________________________________

3. Annual Day: _________________________________________________
   ___________________________________________
   ___________________________________________
   ___________________________________________
   ___________________________________________
   ___________________________________________

4. Activities (Health Fairs, Festivals, Retreats, etc.): ______________
   ___________________________________________
   ___________________________________________
   ___________________________________________
   ___________________________________________
   ___________________________________________
   ___________________________________________

5. Representation Fees: (Conferences, Congress, etc.): _____________
   ___________________________________________
   ___________________________________________
   ___________________________________________
   ___________________________________________
   ___________________________________________