

APOSTOLIC LUTHERAN MISSIONARY ASSOCIATION
(Eastern Branch)

2025 Missionary Expense and Income Report

Missionary _____

General Area _____

Date Beginning _____ Ending _____

Mileage _____ @ .70¢ mile. \$ _____

Wages: _____ Days @ \$150.00 per day \$ _____

Other Expenses

Lodging \$ _____

Air Fare \$ _____

Telephone \$ _____

Other \$ _____

Total Expenses \$ _____

Total income on trip \$ _____

Difference between expense & income \$ _____

General comments of trip and recommendation for the continuance of missionary services in this area:

Special needs of the area (such as language, communion service, song books, Sunday school supplies, taped sermons, etc):

Names, addresses, and telephone numbers of persons to be contacted in this area for future use by other missionaries, etc.):

Name:

Address:

Phone:

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Net Amount Due Missionary: \$ _____ Signature: _____

Address: _____

Date: _____

Approved: _____, Chairman _____, Treasurer _____