

LUTHERAN MARRIAGE ENCOUNTER
Lutheran Marriage Encounter Experience FINANCE REPORT

	Couple Name	Cash	Current Check	Post Dated Check	Current Credit Card or Thrivent	Post Dated credit card or Thrivent
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
	TOTALS					

If more than 12 couples use LN 12 for P-2 Sub-totals

Total Weekend receipts	
Weekend Date	
Host Area	
Facility	
Address	
City, State, Zip	
WEEKEND QUOTE	
Facility Cost	

Signatures:

Clergy: _____
Set 3: _____
Set 2: _____
Set 1: _____

MAIL TO: Dist Finance, Dist Lay Contact and Dean & Marcia Redman, narfinancecouple@gmail.com 3615 Amberidge Dr, Chapel Hill, NC 27514-8225 3615 Amberidge Dr	Couples Friday	Lay	Clergy:
	Cpls leaving		
	Cpls complete		

total Lutheran individuals	
Lutheran Clergy	
Non-Lutheran Clergy	

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	Couple Name	Cash	Current Check	Post Dated Check	Current Credit Card or Thrivent	Post Dated credit card or Thrivent
13						
14						
15						
16						
17						
18						
19						
20						
21						
22						
23						
24						
25						
26						
27						
28						
29						
30						
	Page-2 Sub-TOTAL					