



FOUNTAINGATE CHRISTIAN ASSEMBLY

FINANCIAL DIRECTOR SCOPE OF MINISTRY



Purpose: To maintain and issue accurate records of monies received and spent.

A. TIME REQUIRED: About 3 hours per week for a minimum of one year.

B. QUALIFICATIONS: Diligence & honesty; eye for detail; basic understanding of accounting practices; able to work with computers; willingness to learn (teachable) and grow with ministry.

C. SPECIFIC RESPONSIBILITIES:

1. Answer directly to the Senior pastor and be a member of the Board of Directors.
2. Ensure that the weekly offerings are counted and recorded on a standardized form (enclosed). The marked offering envelopes need to be kept on file for seven years along with a copy of the standardized form.
3. To ensure that all bills and regular expenses are recorded and paid on time.
5. Maintain accurate records of weekly tithes and offerings in such a way that income tax receipts can be issued at any time. Also reports and graphs should be made available to the membership and church board at any time. All information is to be kept on a computer disc as well as in the hard drive and on one other computer in a different location.
5. Complete a monthly bank reconciliation and financial reports (monthly; quarterly and yearly).
6. Issue tax receipts at the end of the year for all receiptable giving.
7. The yearly Registered Charity Information Return (T-3010) must also be submitted to the government. There must also be a filing for the HST rebate as allowed by the government.
8. Make any suggestions for change that will enhance the financial system.
9. To maintain accurate and permanent records of personal information for the family records stored on the computer's bookkeeping system.
10. To complete annual charts/graphs for presentation at the annual February membership meeting each year.

FOUNTAINGATE CHRISTIAN ASSEMBLY RECEIPT OF OFFERING

Please make sure both copies
are lined up--press firmly,
you are making a copy.

Contents of offering env.
must equal amount written
on face of envelope **before listing on this sheet.**

DATE: _____ **A.M. Attendance** _____ **P.M. Attendance** _____

NAME:	GENERAL OFFERING	MISSIONS OFFERING	SPECIAL OFFERING	CHRISTIAN EDUCATION	YOUTH OFFERING	OTHER INCOME	TOTAL
1. _____	: _____	: _____	: _____	: _____	: _____	: _____	: _____
2. _____	: _____	: _____	: _____	: _____	: _____	: _____	: _____
3. _____	: _____	: _____	: _____	: _____	: _____	: _____	: _____
4. _____	: _____	: _____	: _____	: _____	: _____	: _____	: _____
5. _____	: _____	: _____	: _____	: _____	: _____	: _____	: _____
6. _____	: _____	: _____	: _____	: _____	: _____	: _____	: _____
7. _____	: _____	: _____	: _____	: _____	: _____	: _____	: _____
8. _____	: _____	: _____	: _____	: _____	: _____	: _____	: _____
9. _____	: _____	: _____	: _____	: _____	: _____	: _____	: _____
10. _____	: _____	: _____	: _____	: _____	: _____	: _____	: _____
11. _____	: _____	: _____	: _____	: _____	: _____	: _____	: _____
12. _____	: _____	: _____	: _____	: _____	: _____	: _____	: _____
13. _____	: _____	: _____	: _____	: _____	: _____	: _____	: _____
14. _____	: _____	: _____	: _____	: _____	: _____	: _____	: _____
15. _____	: _____	: _____	: _____	: _____	: _____	: _____	: _____
16. _____	: _____	: _____	: _____	: _____	: _____	: _____	: _____
17. _____	: _____	: _____	: _____	: _____	: _____	: _____	: _____
18. _____	: _____	: _____	: _____	: _____	: _____	: _____	: _____
19. _____	: _____	: _____	: _____	: _____	: _____	: _____	: _____
20. _____	: _____	: _____	: _____	: _____	: _____	: _____	: _____
21. _____	: _____	: _____	: _____	: _____	: _____	: _____	: _____
22. _____	: _____	: _____	: _____	: _____	: _____	: _____	: _____
23. _____	: _____	: _____	: _____	: _____	: _____	: _____	: _____
24. _____	: _____	: _____	: _____	: _____	: _____	: _____	: _____
25. _____	: _____	: _____	: _____	: _____	: _____	: _____	: _____
26. _____	: _____	: _____	: _____	: _____	: _____	: _____	: _____
27. _____	: _____	: _____	: _____	: _____	: _____	: _____	: _____
28. _____	: _____	: _____	: _____	: _____	: _____	: _____	: _____
29. _____	: _____	: _____	: _____	: _____	: _____	: _____	: _____
30. _____	: _____	: _____	: _____	: _____	: _____	: _____	: _____

LOOSE OFFERING: _____
TOTALS: _____

SIGNATURES: _____

**(Vertical &
Horizontal Totals
Must Equal**