



BISHOP'S MINISTRY APPEAL

*Fulfilling the Mission with
a Generous Heart*

CASH COLLECTION REPORT

Date: _____ Parish Name: _____ City: _____

Total Amount of Cash	Parish Check Amount/Check Number (equals total amount of cash) Make check payable to the <u>BISHOP'S MINISTRY APPEAL TRUST.</u>

Please print clearly.

Diocesan ID#	Please list each envelope separately.	Amount of Cash	Pledge: Yes or No	Pledge Amount
	<u>ANONYMOUS PILE #2</u>			
	Cash Total:			

BMA Parish Support Staff: _____ **Approved by:** _____
(Name of person responsible for completing this form)



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SAMPLE

CASH COLLECTION REPORT

Date: _____, 2026 Parish Name: _____ St. Mary City: _____ Stockton

Total Amount of Cash	Parish Check Amount/Check Number (equals total amount of cash) Make check payable to the <u>BISHOP'S MINISTRY APPEAL TRUST.</u>
\$288.15	\$288.15 / #1000

Please print clearly.

Diocesan ID#	Please list each envelope separately.	Amount of Cash		Pledge: Yes or No	Pledge Amount
	ANONYMOUS <u>PILE #2</u>	288.15			
	List donor name and address information from <u>Pile #3</u> here.				
12345	Mary Smith, 212 N. San Joaquin St, Stockton 95202	20		Yes	160
54321	John & Sue Jones, 1234 Main Street, Stockton 95203	5			
	Cash Total:	288.15			

BMA Parish Support Staff: _____ Approved by: _____
(Name of person responsible for completing this form)