

**DIOCESE OF MARQUETTE
2024 PARISH FINANCIAL GOVERNANCE REPORT**

PARISH or MISSION NAME: _____ CITY: _____

WE, THE UNDERSIGNED members of the Parish Finance Council for

_____, _____, Michigan, hereby
(Parish/Mission Name) (City)

state that during the preceding year, we met as a Council on the following dates:

_____	_____	_____
_____	_____	_____
_____	_____	_____

WE FURTHER state that a copy of the Parish Annual Financial Statement

was provided to the parishioners on _____.*
(Date)

DATED: _____

Pastor: _____
Signature

Finance Council Members:
(Include Name and Professional Title, if Applicable)

_____ Name	_____ Email Address	_____ Signature
_____ Name	_____ Email Address	_____ Signature
_____ Name	_____ Email Address	_____ Signature
_____ Name	_____ Email Address	_____ Signature
_____ Name	_____ Email Address	_____ Signature
_____ Name	_____ Email Address	_____ Signature
_____ Name	_____ Email Address	_____ Signature
_____ Name	_____ Email Address	_____ Signature

* Please enclose a copy of the Financial Statement as of June 30, 2024 provided to parishioners.

Submit by **September 30, 2024** to:
Diocese of Marquette, 1004 Harbor Hills Drive, Marquette, MI 49855