

Annual Stewardship Record



Mr. _____
 Mrs. _____
 Miss () _____
 Age Last Name First Middle

() _____
 Spouse: Age Maiden Name First Middle

Address: # And Street City State/Country Zip

From _____ 20 _____
 Through _____ 20 _____
 Branch: _____
 Priesthood Office: _____

Children's Names/Ages:

 _____ *Signed _____ Date Signed _____

 _____ *Signed (Spouse) _____ Date Signed _____

 *Payment of tithing due is a matter of conscience and agency. This is not a legally binding agreement and signer(s) cannot be held liable to pay tithing due.

INCOME			
Gross Salary, Wages			
Income from rental property, investments, etc.			
Income from other sources			
TOTAL INCOME			

NECESSARY EXPENSES			
Housing			
Interest, Property Taxes			
Repairs, Maintenance, Insurance, Rent, Utilities			
Replacement Items			
Subtotal			
Commodities			
Food, Restaurants			
Transportation			
Upkeep and Replacement of Clothing			
Personal Needs			
Medical Needs			
Subtotal			
Other			
Income Taxes (Fed, State, Local), Soc. Sec. Payments			
Other Family Needs			
Subtotal			
TOTAL NECESSARY EXPENSES			

TITHING DUE			
A – Subtract Necessary Expenses from Income to find Increase for period covered by this Statement			
B – Divide A by ten to find tithing due on increase for this period			
C – Carry forward amount shown on line D of your First Statement or Line F of your last Annual Statement			
D – Add lines B and C			
E – Total tithing paid during the period covered by this statement			
F – BALANCE TITHING DUE at close of period (Subtract E from D)			