Society of St. St. Vincent de Paul
Conference Report

Summary Report for the month of _____, 2_____

Conference: _____

Total # of home visits for the month: _____

Total spent on vouchers: $_____

Extraordinary expenses
(other than vouchers or furniture) $_____

Balance on Hand $_____

Comment (optional) (Could include information about resources you wish other conferences to be aware of, extraordinary situations, particular successes or challenges, new members, Bundle Up Weekends results, new projects, and so on)

_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____

Please submit to your Particular Council President monthly generally at the Particular Council meeting: