Southeastern California Conference of Seventh-day Adventists®

Office of Education

ANNUAL INFORMATION FOR CHURCH SUBSIDIES
2024-2025 SCHOOL YEAR

Please complete and return it to Cynthia Garcia by April 15, 2024.

Name of School: _____

Name of Constituent Church	MONTHLY OPERATING Subsidy	CHANGE in Annual Subsidy from previous year	Total Annual Payment Due School
	$	$	$
	$	$	$
	$	$	$
	$	$	$
	$	$	$
	$	$	$
	$	$	$
	$	$	$
	$	$	$
	$	$	$
	$	$	$
	$	$	$
	$	$	$
	$	$	$
	$	$	$
	$	$	$
	$	$	$
	$	$	$
	$	$	$
TOTAL AMOUNTS	**$** 0	**$** 0	**$** 0

Notes: _____

_____.

_____ Name of Person Completing this Report

_____ Name of Person to Contact after July 1

_____ Telephone Number