

# *Mount Gilead Missionary Baptist Church*

Dr. Shelton Murphy, Pastor

*Making Disciples Through Transforming Power of Jesus Christ*

*In the Spirit of Excellence*

## **After Action Ministry Report**

Name of ministry \_\_\_\_\_ Date \_\_\_\_\_

Vision Statement: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Mission Statement. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Purpose of \_\_\_\_\_

Ministry Function: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Approx. How many \_\_\_\_\_ Were pictures or  
were in attendance? \_\_\_\_\_ videos taken? \_\_\_\_\_

Circle one regarding  
success Rate: **A. Poor** **B. Fair** **C. Good** **D. Excellent**

List offerings collected: \_\_\_\_\_

Expenses paid if any: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signature of  
Ministry Chairperson: \_\_\_\_\_

*Upon completion please submit this After Action Report to Pastor Murphy*