SPECIAL PIONEER REPORT

Name ..... City ..... Province or State .....
(Please print plainly)

Report for month of ..... 19 .....

Total Books	Total Booklets	Total Hours	New Subs.	Ind. Mags.	Return Visits	Home Bi. Stud.

No. brought to ded'n since apptd. sp. pio. ☐

(NOTE: If you are eligible for an allowance, and desire to receive it, please fill in the requested information below. If you did not devote 150 hours to the field ministry for the month, under Remarks please explain the circumstances. If you do not desire the allowance, under Remarks please write "No allowance desired.")

Remarks concerning report: .....

.....

.....

.....

.....

.....

Mail check for ☐

Credit my literature account .....

Credit my magazine account .....

Travel allowance .....

Monthly allowance .....

Total allowance .....

The special pioneer is not to write in this space

Per .....

.....
(Number and date of check)

Audited ..... O.K. .....

Mail check to my address, which is:

Street Address or Box No. .....

City ..... Province or State ..... Zone or Code .....

Signed .....

S-212 1/75 (Please see over) Printed in U.S.A.