



PATHFINDER HARVEST MINISTRIES

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BIBLE
TRANSLATION
DEPARTMENT

ATTENDANCE LIST FOR FACILITATORS

DAY _____ DATE: _____

No.	Facilitator's Name	Language group/assigned work	Facilitator's Signature		If absent, comment(reason) from the translation coordinator/Supervisor
			7:30am	6:30pm	

"Every Language to have Bible in their mother tongue"