LOCAL CHURCH OFFICIALS LIST

(insert Charge Conference yr.)

CHURCH INFORMATION

Church name			
Mailing address			
City	State		Zip
Phone ()		Fax ()	
Email		Website	
P.	ASTOR II	NFORMATION	
Pastor(s) name, home addres	ss, email, ph	none number:	
Does your church operat		he one board	model? If yes, please
Name	Email		Phone Number
I I			

VOLUNTEER/NON-PAID CHURCH POSITIONS

1. LAY LEADER				
Name:				
Address:				
Phone: ()	Email:			
2. CHAIR, CHURCH/ADMINISTRATIV	E COUNCIL			
Name:				
Address:				
Phone: ()	Email:			
3. CHAIR, PASTOR/STAFF-PARISH	RELATIONS			
Name:				
Address:				
Phone: ()	Email:			
4. CHAIR, BOARD OF TRUSTEES				
Name:				
Address:				
Phone: ()	Email:			
5. CHAIR, COMMITTEE ON FINANCE				
Name:				
Address:				
Phone: ()	Email:			
6. CHURCH TREASURER				
Name:				
Address:	1			
Phone: ()	Email:			
7. LAY MEMBER OF ANNUAL CONFI	ERENCE			
Name:				
Address:				
Phone: ()	Email:			
8. LAY MEMBER OF ANNUAL CONFERENCE (if applicable)				
Name:				
Address:	T			
Phone: ()	Email:			

9. LAY MEMBER OF ANNUAL CONFERENCE (if applicable)				
Name:				
Address:				
Phone: ()	Email:			
10. ALTERNATE LAY MEMBER OF A	ANNUAL CONFERENCE			
Name:				
Address:				
Phone: ()	Email:			
11. ALTERNATE LAY MEMBER OF A	ANNUAL CONFERENCE			
Name:				
Address:				
Phone: ()	Email:			
12. CHURCH HISTORIAN				
Name:				
Address:				
Phone: ()	Email:			
13. UNITED WOMEN IN FAITH REPR	ESENTATIVE			
Name:				
Address:				
Phone: ()	Email:			
14. UNITED METHODIST MEN REPRESENTATIVE				
Name:				
Address:				
Phone: ()	Email:			
15. BOOKKEEPER				
Name:				
Address:				
Phone: ()	Email:			

PLEASE LIST ANY OTHER CHURCH LEADERSHIP HERE

NAME	JOB TITLE	EMAIL ADDRESS			
PLEASE LIST ALL FULL AND PART-TIME PAID CHURCH STAFF					
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