

Associational Supplement Form (Part B)

Due date: _____

Throughout this form “this year” includes any date since completing this report last year.

CHURCH NAME*

NEW MINISTERS List any new pastors/ministers who have been ordained or licensed this year.

_____	___ Ordained	___ Licensed
_____	___ Ordained	___ Licensed
_____	___ Ordained	___ Licensed
_____	___ Ordained	___ Licensed
_____	___ Ordained	___ Licensed

OTHER MINISTERS List any other ministers who are members of your church. You do NOT need to include current staff or new ministers listed above. Please choose applicable labels.

_____	___ Ordained	___ Licensed
___ Evangelist ___ Retired ___ Other		
_____	___ Ordained	___ Licensed
___ Evangelist ___ Retired ___ Other		
_____	___ Ordained	___ Licensed
___ Evangelist ___ Retired ___ Other		
_____	___ Ordained	___ Licensed
___ Evangelist ___ Retired ___ Other		

KEY CONTACTS There must be one valid name for each of the first three positions below. Please make sure email addresses are unique rather than a generic or mass email address. In the event there is no official secretary or ACP contact, just enter the pastor's name again.

Pastor (main)*

Pastor's Email

Pastor's Cell Phone

Secretary (main)*

Secretary's Email

Secretary's Cell/Work Phone

ACP Contact (main)*

ACP Contact's Email

ACP Contact's Cell Phone

Email Contact Person (Add an Email Contact Person if no one listed above has an email address.)

Email Address
