



SIXTH EPISCOPAL DISTRICT AFRICAN METHODIST EPISCOPAL CHURCH

Pastor's Report Form

Contact and Address Information

PART A

Name of Church	_____	Name of Pastor	_____
Address of Church	_____	Mailing Address of Pastor	_____
Church Telephone	_____	Home Telephone	_____
		Cell Phone	_____
		Email Address	_____
Annual Conference	_____	Presiding Elder District	_____
Episcopal District	Sixth	Presiding Elder	_____
Presiding Bishop	Michael L. Mitchell	Conference Opening Date	_____

Demographics

Part B

1. Conversions	_____
2. Accessions	_____
Increase	_____
Decrease	_____
3. Baptisms	_____
4. Members Left	_____
5. Members on Roll	_____
a. Active Members	_____
b. Adults	_____
c. Children and Youth	_____
6. Registered Voters	_____
7. Marriages Performed	_____
8. Lay Organization	Yes _____ No _____
a. How many members?	_____
9. WMS Members?	_____
10. YPD/CDMC Members?	_____
11. SOA Members?	_____
12. RAYAC Membership	_____

Part C

Funds Raised Local Church?	_____
Indebtedness?	_____
Church Treasury Balance	_____
Does Church have budget?	_____
How much is local budget?	_____
Pastor's Compensation	
a. Base Salary	_____
b. Housing Allowance	_____
c. Health, Auto, etc.	_____
d. Total Package	_____
Annuity and Insurance	_____
a. Pastor	_____
b. Presiding Elder	_____
Receipt on General Budget	_____
Cash on General Budget	_____
Total Budget	_____
Episcopal District Budget	_____

SIXTH EPISCOPAL DISTRICT

AFRICAN METHODIST EPISCOPAL CHURCH

13. Annual Conference Members _____
- a. Itinerant Elders/Deacons _____
- b. Local Elders/Deacons _____
- c. Licensed Evangelist/Missionary _____
- d. Retired Elders/Deacons _____
- e. Licentiates _____
- f. Supernumerary _____
- g. Total _____
14. Periodicals _____
15. Real Estate
- a. Newly Erected Churches _____
- b. Newly Erected Buildings _____

Part D

Does church have insurance?

Property Insurance? _____ Yes _____ No Valuation _____

Liability Insurance? _____ Yes _____ No Valuation _____

Auto Insurance? _____ Yes _____ No Valuation _____

Part E

Does the church have a mortgage or loan? _____ yes _____ no

If yes, what bank or firm is mortgage with? _____

Amount of original mortgage or loan? _____

Balance of mortgage or loan? _____

Amount of monthly mortgage or loan payment? _____

Is mortgage or loan payment current? _____

Have you provided copy of mortgage or loan statement from lending institution to conference Trustees?

Part F

Legal Description of property:

Address _____ GA _____

Number	Street	City	County Parish	State	Zip Code
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Lots: _____ In Block _____ of _____ a _____ County or Parish

State of _____ According to the plot thereof recorded in Plot Book _____ Page _____

By my signature below, I certify that the information listed in this report is accurate and truthful.

Pastor

Annual Conference Delegate

Date _____