

Church:

	PIN#
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City:

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BUSINESS ADMINISTRATOR

NAME AND E-MAIL	ADDRESS (STREET, CITY, ZIP)	PHONE(S) SPECIFY IF CELL/HOME/OFFICE

FACILITIES MANAGER

NAME AND E-MAIL	ADDRESS (STREET, CITY, ZIP)	PHONE(S) SPECIFY IF CELL/HOME/OFFICE

TREASURER

NAME AND E-MAIL	ADDRESS (STREET, CITY, ZIP)	PHONE(S) SPECIFY IF CELL/HOME/OFFICE

DEACON MODERATOR

NAME AND E-MAIL	ADDRESS (STREET, CITY, ZIP)	PHONE(S) SPECIFY IF CELL/HOME/OFFICE

EDUCATION STAFF

NAME, TITLE, AND E-MAIL	ADDRESS (STREET, CITY, ZIP)	PHONE(S) SPECIFY IF CELL/HOME/OFFICE

MISSIONS COMMITTEE CHAIR

NAME AND E-MAIL	ADDRESS (STREET, CITY, ZIP)	PHONE(S) SPECIFY IF CELL/HOME/OFFICE

Due Date: March 15, 2024

STEWARDSHIP COMMITTEE CHAIR

NAME AND E-MAIL	ADDRESS (STREET, CITY, ZIP)	PHONE(S) SPECIFY IF CELL/HOME/OFFICE

PERSONNEL CHAIR

NAME AND E-MAIL	ADDRESS (STREET, CITY, ZIP)	PHONE(S) SPECIFY IF CELL/HOME/OFFICE

WORSHIP COMMITTEE CHAIR

NAME AND E-MAIL	ADDRESS (STREET, CITY, ZIP)	PHONE(S) SPECIFY IF CELL/HOME/OFFICE

EVANGELISM/MEMBERSHIP COMMITTEE CHAIR(S)

NAME, TITLE, AND E-MAIL	ADDRESS (STREET, CITY, ZIP)	PHONE(S) SPECIFY IF CELL/HOME/OFFICE

LEADERSHIP:

NAME AND E-MAIL	ADDRESS (STREET, CITY, ZIP)	PHONE(S) SPECIFY IF CELL/HOME/OFFICE

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NAME AND E-MAIL	ADDRESS (STREET, CITY, ZIP)	PHONE(S) SPECIFY IF CELL/HOME/OFFICE

LEADERSHIP TO BE REMOVED (TERMING OFF) :

NAME AND E-MAIL	NAME AND E-MAIL	NAME AND E-MAIL

Due Date: March 15, 2024