

The Cape Fear District Union

of

The Original Cape Fear & Southwestern Free Will Baptist Annual Conference

Elder Coleman Elliott, President

Elder John Woods, Vice President

Church Financial Report

District Union: ___ Winter ___ Summer Year _____

Name of Church: _____

Church Address: _____

Delegates: _____

Total number of all members: = _____

(Including Ministers, Deacons and exempt)

Assessments

Pastor: _____ = \$ 10.00

**Note: Please DO NOT include your Ministers and Deacons in your total for Adult Membership.
They should be listed separately below.

1. Total Number of Elders: _____ x \$8.00ea. = \$ _____

2. Total Number of Minister: _____ x \$6.00ea. = \$ _____

3. Total Number of Deacons: _____ x \$7.00 ea. = \$ _____

4. Total Number of Adult Members: (DO NOT INCLUDE EXEMPT) _____ x \$2.00 ea. = \$ _____

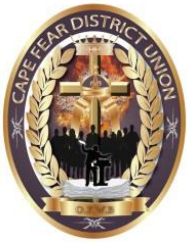
5. Total Number of Minor Members: _____ x \$1.00 ea. = \$ _____

6. Union Workers Report _____ (\$30.00 Minimum) = \$ _____

Total Amount sent to Union (total includes lines 1,2,3,4,5,6 + Pastor) = \$ _____

Church Secretary Signature: _____

Pastor Signature: _____



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Date: _____

Church Name: _____

Pastor: _____

Pastor's Dues: \$10.00

Ministerial Staff

Elders = \$8.00 ea. Ministers= \$6.00

(Please list names below – you may use an additional sheet if necessary)

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Total Paid for Ministerial Staff: \$_____

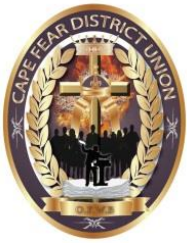
Deacons

Deacons = \$7.00 ea.

(Please list names below – you may use an additional sheet if necessary)

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Total Paid for Deacons: \$_____



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Church Statistical Report

District Union: ___ Winter ___ Summer Year _____

Name of Church: _____

Church Address: _____

Phone: _____

Delegates: _____

Statistics

Total number of Adult Members: (DO NOT INCLUDE EXEMPT) _____ x \$2.00 ea. = \$ _____

Total number of Minor Members: _____ x \$1.00 ea. = \$ _____

Total number of all members: = _____

(Including Ministers, Deacons and exempt)

Total Amount sent to Union (including Ministers, Deacons) = \$ _____

Amount Donated to Charity: \$ _____ Union Worker's Report: _____

Delegates Report

Church is in fellowship with the Union _____ Yes _____ No

Church has met its financial obligation _____ Yes _____ No

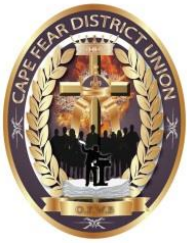
Has membership increased since the last District Union _____ Yes _____ No

Name of Church Secretary: _____

Address: _____

Phone: _____

Pastor: _____



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New Minister's Profile

Name: _____

Address: _____

Contact Number: _____ Email Address: _____

Church Membership: _____ Since: _____ Mo _____ Yr

Initial Sermon: _____ Mo _____ Yr

Credentials

Please attach a copy of your Credentials for review.

Ordained: ___ Y ___ N Date of Ordination: _____

Ordaining Body or Organization:

Ordaining Body's Presiding Officer/Pastor: _____

Minister's Signature: _____

Pastor's Signature: _____

Below to be completed by the Chairperson of the Cape Fear District Union Investigation Committee.

Credentials have been verified: ___ Yes ___ No Joining Fee \$8.00 Paid: ___ Yes ___ No

The above individual has been interviewed by the investigation committee and has been found to be in Gospel Order.

It is the recommendation of the Investigation Committee that the above listed individual be accepted in the Cape Fear District Union. ___ Yes ___ No ****If No, please indicate reason below.**

Chairperson of the Investigation Committee

Date accepted in

Cape Fear District Union: _____

Elder Coleman Elliott, President