

**Free Will Baptist Church Letter
To the
Quarterly Meeting/St. Francois District Association**

The 548th Quarterly St. Francois District Association Meeting will be held at the _____ Church at 9:30 AM on Saturday, _____, 20____. **The period of this report is _____ 1, 20__ thru _____, 20__.**

Name of Church: _____ Telephone: _____
City: _____ State: _____ Zip: _____
Church Website: _____ Church E-Mail: _____
Name of Pastor: _____ Telephone: _____
Mailing Address: _____
City: _____ State: _____ Zip: _____
Pastor's Email: _____
Name of Clerk: _____ Telephone: _____
Mailing Address: _____
City: _____ State: _____ Zip: _____
Clerk's Email: _____

A. CHURCH CHARACTERISTICS

- | | |
|---------------|-------------------|
| 1. Location | 2. Is Your Pastor |
| () City/Town | () Full Time |
| () Rural | () Part Time |

C. STEWARDSHIP INFORMATION

1. Does Your Church Have a Budget?
() Yes () No
2. Total Tithes and Offerings for This Reporting Period.
\$ _____

E. GENERAL INFORMATION

1. Number of Ordained Ministers _____
2. Number of Licensed Ministers _____
3. Number of Ordained Deacons _____
4. Does Your Church Have:
() Day Care
() Christian Day School
() Bible Institute
() College
() Kindergarten
5. Does Your Church Have a Sunday School?
() Yes () No
Total Enrollment _____
6. Does Your Church Have Church Training Service?
() Yes () No
Total Enrollment _____
7. Does Your Church Have Women's Auxiliary?
() Yes () No
Total Enrollment _____
8. Does Your Church Have Master's Men?
() Yes () No
Total Enrollment _____

B. MEMBERSHIP INFORMATION

1. Total Baptisms

2. Total Members Added

3. Total Members Lost

4. Total Membership

D. BUILDING INFORMATION

1. Does Your Church Have a Parsonage?
() Yes () No
2. Total Value of All Church Property, Including Parsonage.
\$ _____

DELEGATES

RECOMMENDATIONS AND REQUESTS

Representation Fee:

\$ _____

Pastor's Signature

Clerk's Signature