

2016 Cooperating Church – Annual Clerk Report

Legal Name of Church: _____

Location Address: _____
Street Address City / State / Zip Code

Mailing Address: _____
C/O and Street Address or PO Box information City / State / Zip Code

Offering Address: _____
C/O and Street Address or PO Box information City / State / Zip Code

Office Phone: _____ Fax Phone: _____

Church Email: _____ Church Website: _____

CHURCH MEMBERSHIP

(Please enter data as of yearend 2016)

Total Church Membership: _____
Resident Active Membership: _____
Resident Inactive Membership: _____

NEW MEMBERS RECEIVED BY:

Baptism _____
 Letter _____
 Other _____

MEMBERS LOST BY:

Death _____
 Letter _____
 Other _____

AVERAGE WEEKLY ATTENDANCE

(Please enter data as of yearend 2016)

WORSHIP:

Morning/Primary Services
(Combine if more than one) _____
 Afternoon/Evening Services
(If held at least twice per month) _____

SUNDAY/CHURCH SCHOOL:

Pre-School _____
 Elementary _____
 Youth _____
 Young Adults _____
 Adults _____

FINANCES

(Please enter data as of yearend 2016)

Non-ABC Missions: \$ _____

Include local missions and community projects. If dually aligned, include amounts given to other denominations.

Total Church Income: \$ _____

Include income received from all sources for all purposes, including mission contributions. Do not include loans.

Total Local Expenditures: \$ _____

Include everything your church and its organizations spent during the year, such as pastoral salaries and benefits, mortgage payments, etc. DO NOT include mission contributions or transfers to a building or endowment fund.

Person Completing Annual Church Clerk Report

Please have the pastor and the church clerk review the completed Annual Church Clerk Report information. This is an important document in the ABC Archives for every church. It can prove your church's denominational relationship and cooperation in the possibility of future legal questions (e.g. proving your ABC relationship to receive a bequest, etc.)

Name: _____ **Date:** _____

Title: _____ **Email address or phone number:** _____

Pastor Signature: _____ **Date:** _____