



CONGREGATIONAL HOLINESS CHURCH, INC. CENTRAL GEORGIA DISTRICT CHURCH REPORT

Annual Semi-Annual Quarterly Monthly

Church Name _____ Pastor: _____

Address: _____ City _____ State _____ Zip _____

For Period Ending: ____ / ____ / ____ Phone _____ Fax _____

CHURCH STATISTICS

1. MEMBERSHIP

- A. Beginning Church Members _____
- B. New Members
 - New Converts _____
 - Transfers In _____
- C. Members Exited
 - Deceased _____
 - Dropped _____
 - Transfers Out _____
 - Inactive _____
- D. Ending Church Members _____

- B. Sunday School _____
- C. Children's Church _____
- D. Sunday P. M. Worship _____
- E. Wednesday P. M. Worship _____
- F. Youth (Youth Ministry) _____
- G. Women's Ministries _____
- H. Missionettes _____
- I. Brotherhood _____
- J. Royal Rangers. _____

3. SPIRITUAL EXPERIENCES

- A. New Converts _____
- B. Sanctification _____
- C. Holy Ghost Baptism _____
- D. Water Baptism _____
- E. Revivals _____
- F. Communion _____

2. AVERAGE ATTENDANCE

- A. Sunday A.M. Worship _____

FINANCIAL

1. RECEIPTS

- A. Tithes & Offerings _____
- B. Sunday School Offerings _____
- C. Building Fund _____
- D. Local Home Missions _____
- E. Campground _____
- F. District C.E. Department _____
- G. District Home Missions _____
- H. District World Missions _____
- I. General C.E. Department _____
- J. General Home Missions _____
- K. General World Missions _____
- L. Mission USA Pledge _____
- M. Other _____
- N. _____
- O. _____

Total Receipts _____

Revivals Scheduled: _____

Evangelist: _____

2. DISBURSEMENTS

- A. Church 10% _____
- B. Pastor's Tithes _____
- C. Building Fund _____
- D. Sunday School 10 % _____
- E. Campground _____
- F. District C.E. Department _____
- G. District Home Missions _____
- H. District World Missions _____
- I. District W.M.'s _____
- J. District Missionettes _____
- K. District Brotherhood _____
- L. District Royal Rangers _____
- M. General C.E. Department _____
- N. General Home Missions _____
- O. General World Missions _____
- P. Mission USA Pledge _____
- Q. Other _____

Total Disbursed _____

Total amount with this Report _____

Secretary's Signature: _____

Delegates: _____