**VESTRY or BISHOP’S COMMITTEE REPORT Church ID # \_\_\_\_\_**

PLEASE COMPLETE THIS FORM AND RETURN TO THE DIOCESAN OFFICE

**Church Name and Location:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Main contact person, beside the priest\_

## OFFICERS for 2022 \*\*\*

 NAME FULL MAILING ADDRESS PHONE

 & e-mail address (Best contact number)

 Indicate if they have no email address

1. SENIOR WARDEN: Name:

Mailing address:

Email address:

Contact number:

1. JUNIOR WARDEN: Name:

Mailing address:

Email address:

Contact number:

1. TREASURER: Name:

Mailing address:

Email address:

Contact number:

1. CLERK: Name:

Mailing address:

Email address:

Contact number:

# **OTHER VESTRY or BISHOP’S COMMITTEE MEMBERS**

1. Name:

Mailing address:

Email address:

Contact number:

1. Name:

Mailing address:

Email address:

Contact number:

1. Name:

Mailing address:

Email address:

Contact number:

1. Name:

Mailing address:

Email address:

Contact number:

1. Name:

Mailing address:

Email address:

Contact number: