

**REPORT
of
CONGREGATION
to
PRESBYTERY
of the
CUMBERLAND PRESBYTERIAN CHURCH
IN AMERICA**



As the Clerk, I certify that the information as contained in this report is accurate, to the best of my knowledge.

Name of Church _____

Incorporated Yes _____ No _____

Date of Incorporation _____

Signature of Pastor and Date _____

Signature of Clerk and Date _____

Clerk's Address _____

Clerk's Telephone Number _____

To: _____ Presbytery Date: _____

As the Stated Clerk of the church session, I certify that, to the best of my knowledge, the information contained in this report is accurate.

(Clerk's Signature) (Clerk's Address)

(City, State, Zip Code) Home _____ Work _____
(Telephone Numbers)

PART I. GENERAL INFORMATION

A. Name of the congregation _____
Street Address _____
Mailing Address (if different) _____
City, State, Zip Code _____
Church Telephone Number () _____

B. Name of the Pastor _____
Pastor's Address _____
City, State, Zip Code _____
Telephone Numbers _____ Home _____ Work _____

C. Number of Elders _____ D. Number of Deacons _____
Name of Elder(s) who has (have) died since the last report

E. Names of Candidates for the Ministry (not ordained)

F. Frequency of Regular Worship Services (Mark the appropriate one)

- () Every Sunday, including the fifth Sunday
- () First, second, third and fourth Sundays only
- () Three Sundays per month
- () Two Sundays per month
- () One Sunday per month

PART II. MEMBERSHIP STATISTICS

A. How many members do you have?

- 1. Active members _____
- 2. Inactive members (Names still on roll) _____
- 3. Total number on church roll _____

B. How many members were added to the church since the last meeting of Presbytery?

- 1. By public profession of faith _____
- 2. By transfer of membership _____
- 3. By reaffirmation of faith _____
- 4. Total number added _____

C. How many members have been dismissed from the church since the last meeting of Presbytery?

- 1. Death _____
- 2. By transfer of membership _____
- 3. By another means _____
- 4. Total number dismissed from church: _____

D. How many baptisms have been administered since the last meeting of the Presbytery?

- 1. Adult or believer baptisms _____
- 2. Infant baptisms _____
- 3. Total number of baptisms _____

E. Change in membership since the last meeting of Presbytery.

- 1. Total number on the church roll reported to the Presbytery in its last meeting _____
- 2. Total added this year (see B above) _____
- 3. Total dismissed this year (see C above) _____
- 4. Net gain or loss _____
- 5. Total on church roll at this time (1 + 4) _____

PART III. ACTIVITIES AND MINISTRIES OF THE CONGREGATION

Please indicate which of the following apply to your congregation. Give an estimate of the number of members who participate.

<u>Activity/Ministry</u>	<u>Active</u>		<u>Members</u>
1. Sunday School	<input type="checkbox"/> Yes	<input type="checkbox"/> No	_____
2. Youth Fellowship	<input type="checkbox"/> Yes	<input type="checkbox"/> No	_____
3. Missionary Society	<input type="checkbox"/> Yes	<input type="checkbox"/> No	_____
4. Choir(s)	<input type="checkbox"/> Yes	<input type="checkbox"/> No	_____
5. Subscription to the Cumberland Flag	<input type="checkbox"/> Yes	<input type="checkbox"/> No	_____
6. Junior Missionary Society	<input type="checkbox"/> Yes	<input type="checkbox"/> No	_____
7. Ushers	<input type="checkbox"/> Yes	<input type="checkbox"/> No	_____
8. Revivals (Converts)	<input type="checkbox"/> Yes	<input type="checkbox"/> No	_____
9. Worship (Committees)	<input type="checkbox"/> Yes	<input type="checkbox"/> No	_____
10. Mission & Evangelism Committee	<input type="checkbox"/> Yes	<input type="checkbox"/> No.	_____
11. Christian Education Committee	<input type="checkbox"/> Yes	<input type="checkbox"/> No	_____
12. Senior Ministry	<input type="checkbox"/> Yes	<input type="checkbox"/> No	_____
13. Men's Ministry	<input type="checkbox"/> Yes	<input type="checkbox"/> No	_____
14. Others (list them)	<input type="checkbox"/> Yes	<input type="checkbox"/> No	_____
_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No	_____
_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No	_____
_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No	_____

IV. PROPERTY MATTERS

Please estimate (or give exact amount) the value of existing properties owned by the church.

A. Church Building and Land \$ _____

B. Manse/Parsonage _____

C. Other Properties

1. _____

2. _____

3. _____

D. Total value of properties \$ _____

E. Current indebtedness on properties \$ _____

F. Amount of insurance on properties \$ _____

G. Submitted copy of Deed to Presbytery Yes _____ No _____

V. FINANCIAL INFORMATION

A. Is your church using the Unified Budget Method Yes _____ No _____

B. Income since the last meeting of Presbytery

- 1. Regular Offerings/Givings (Tithes, Offerings) \$ _____
- 2. Benevolence Offering _____
- 3. Building Fund Offerings _____
- 4. Special Offerings or Gifts _____
- 5. All organizations (Sunday School CPYF, Choirs, all others) _____
- 6. Other Sources of Income (list them)

- A. _____
- B. _____
- C. _____

7. TOTAL INCOME FROM ALL SOURCES \$ _____

8. TOTAL INCOME TO BE USED FOR ASSESSMENT (Line 7 -(2+3)) \$ _____

C. Expenditures since the last meeting of Presbytery

- 1. Pastor \$ _____
- 2. Musician and other employees \$ _____
- 3. Building Needs
 - A. Repairs and Maintenance _____
 - B. Loan Repayments _____
- 4. General Program (Sunday School, Supplies, Materials, etc.) _____
- 5. Local Benevolences _____
- 6. Mission & Evangelism Ministry _____
- 7. Christian Education Ministry _____
- 8. Presbytery Share _____
- 9. Synod Share _____
- 10. General Assembly Share _____
- 11. Other Denominational Programs
 - A. Love Loaf _____
 - B. Sickle Cell Anemia, American Diabetes, Heart, Cancer Foundations _____

12. Other Expenditures (Miscellaneous) _____

TOTAL EXPENDITURES FROM ALL SOURCES \$ _____

VI. OFFICERS OF STANDING COMMITTEES

Please give the name, address and telephone number of the chairperson (president) and secretary of your standing committees, such as Christian Education Committee, Mission and Evangelism Committee, and Worship Committee.

Name of the Committee	Chairperson	Secretary
1. _____	_____ _____ _____ _____	_____ _____ _____ _____
2. _____	_____ _____ _____ _____	_____ _____ _____ _____
3. _____	_____ _____ _____ _____ _____	_____ _____ _____ _____ _____
4. _____	_____ _____ _____ _____ _____	_____ _____ _____ _____ _____
5. _____	_____ _____ _____ _____ _____	_____ _____ _____ _____ _____

VII. MINISTRIES IN CHRISTIAN EDUCATION

Consider the programs/ministries listed below. Indicate which of them your congregation participated in during the last year.

<u>The Program</u>	<u>Your Congregation's Involvement</u>		
1. Sunday School	() Yes	() No	Number _____
2. Youth Fellowship	() Yes	() No	Number _____
3. Vacation Bible School	() Yes	() No	Number _____
4. Mid-week Bible Study	() Yes	() No	Number _____
5. Camps or Retreats	() Yes	() No	Number _____
6. Workshops	() Yes	() No	Number _____
7. Subscriptions to the Cumberland Flag	() Yes	() No.	Number _____
8. Did you send representatives to:			
a. Presbytery's CPYF	() Yes	() No	Number _____
b. Presbytery's Sunday School Convention	() Yes	() No	Number _____

VIII. MINISTRIES IN MISSION & EVANGELISM

Consider the programs/ministries listed below. Indicate which of them your congregation participated in in some way during the last year.

1. Love Loaf Program (Lent or Easter)	() Yes	() No
2. Children in Mission	() Yes	() No
3. Training Event for the Committee	() Yes	() No
4. Benevolences: Outreach for Christ	() Yes	() No
5. New Church Development Project	() Yes	() No
6. Ministries to the Poor, Homeless, Hungry, Destitute, Unprotected	() Yes	() No
7. Door-to-Door Visitation	() Yes	() No
8. Revival	() Yes	() No
9. Ministry to the Inactive member	() Yes	() No
10. Social Action Ministry	() Yes	() No
11. Nurturing Prospects for Membership(Discipline Training)	() Yes	() No
12. Training for Elders	() Yes	() No
13. Training for Deacons	() Yes	() No
14. Theology of CPCA	() Yes	() No

Deceased Ordained Elders since last Presbytery

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1. _____
 2. _____
 3. _____
 4. _____
 5. _____

Describe any innovative ministries in your church that you would like to share with other churches:

Contact Person: _____
Address _____
Phone: _____
E-mail Address _____