Ministers Report Form to Church Conference

Name ^	
First	Last
Address	
Address Line 1 *	Address Line 2
City *	State *
Zip Code *	Country *
Phone Number *	Select Local Curch *
	West Babylon, NY ✓
Church Phone Number *	Minister's License # *
Select Report Month *	Ministry Title *
May ▼	O Bishop
	Minister Lay Minister
Accountability:	
Number of Sermons *	Number Converted *
Number Sanctified? *	Number Received Holy Ghost? *
Baptized in Water? *	Added to the Church? *
Church Homes Visited? *	Non-members Homes Visited?*
General Information & Core Values:	
Prayer: Approximately how many events/activities did your church conduct to promote prayer? *	Do you have a consistent prayer life and family worship? *
	○No
Harvest: Approximately how many events/activities did your church conduct to promote missions, outreach and church planning? *	Leadership Development:Approximately how many events/activities did your church conduct to promote the development of leaders? *
How many leaders were involved in these activities?*	Are you continuing to upgrade your ministry? *
	○Yes
	○ No