

SOUTH GEORGIA ANNUAL CONFERENCE
UNITED METHODIST CHURCH

EXTENSION CLERGY
REPORT TO CHARGE CONFERENCE

NAME OF CLERGY _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

HOME PHONE (_____) _____ - _____

E-MAIL ADDRESS _____

STATUS _____

CHARGE CONFERENCE MEMBERSHIP _____

1. Number of Funerals _____
2. Number of Preaching Engagements _____
3. Number of Weddings _____
4. Number of Baptisms _____

Narrative Report

In a couple of paragraphs, please summarize your year of ministry.

Signed _____ Date: _____