

Preface Statement

Please note that these are the official report forms for the Christian Methodist Episcopal Church that have been developed and approved by the College of Bishops, and reviewed by the Legal Counsel of the Christian Methodist Episcopal Church. It is strongly suggested by the College of Bishops that these report forms be used by all Presiding Elders of the Christian Methodist Episcopal Church for each Quarterly Conference.

It is recommended by the College of Bishops that these report forms be utilized as a supplement to the latest revised copy of the Book of Discipline of the Christian Methodist Episcopal Church. In all cases it should be noted that the latest revised copy of the Book of Discipline of the Christian Methodist Episcopal Church is the legal authority regarding any reference to legal matters pertaining to the official operation of the Christian Methodist Episcopal Church and should be considered as the primary resource and source of information for any legal issues or questions.

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**THE CHRISTIAN METHODIST EPISCOPAL CHURCH
QUARTERLY CONFERENCE REPORT
PASTOR'S REPORT**

DATE: _____ CHURCH: _____

Presiding Elder _____ and members of the _____ Quarterly Conference, it is a privilege to submit this report for the quarter beginning _____ and ending _____

MEMBERSHIP

Number of Infants Baptized: _____ Number of Youth Baptized: _____

Number of Adults Baptized: _____ Number of Converts Added: _____

Number of Members Transferred: _____ Members added otherwise: _____

Number of Members Lost by Death: _____ Number of Members lost sight of: _____

Number of Members Removed: _____ Number of Members Transferred: _____

Number on Cradle Roll: _____ Number of Preparatory Members: _____

Number of Affiliate/Assoc Members: _____ Number of Full Members: _____

Total Present Membership: _____

WORSHIP SERVICES

What is the average attendance for Sunday Morning Worship Service? _____

Adults _____

Young Adults _____

Youth _____

Children _____

What is the average attendance for Sunday School? _____

What is the average attendance for Bible Study? _____

PASTORAL MINISTRY

Visits to the Jails/Prison: _____ Visits to Nursing Homes: _____

Visits to Sick/Shut-In: _____ Visits to Hospitals: _____

Number of Funerals Conducted: _____ Communion to shut-in _____

Number of Marriages Performed: _____ Community meetings _____

Number of counseling sessions held _____

PASTORAL LEADERSHIP

Number of Exhorters: _____ Number of Local Preachers _____
Number of Local Deacons: _____ Number of Local Elders _____
Number of Traveling Deacons: _____ Number of Traveling Elders _____
Training Sessions Conducted: _____

How are the Connectional Programs and Ministries promoted in the local church? Describe the means:

Are there plans to observe the founding of the C.M.E. Church? Yes _____ No _____

Are there any legal issues pending? Yes _____ No _____

If yes, what are they and how are they being addressed?

Has a copy of the CME Church Sexual Harassment Policy been presented to all church employees?

Have all incidents of concern been reported to the Presiding Elder or proper authority? _____

Have all Insurance Claims been properly filed? _____

If yes, what is the status of the claim? _____

What social and civic activities are you involved in?

What are your goals for this Conference year?

Does your local church have a midweek bible study? _____ Prayer meeting? _____

Who conducts them? _____

Has an annual Church Calendar been developed and approved and where are copies? _____

Has an annual Church Budget been developed and approved and where are copies? _____

Describe the general condition and spiritual state of the local Church:

PASTOR'S COMPENSATION

Has the Pastor's Salary been set for this conference year? _____

If so, provide the yearly salary: _____

List all other benefits and the amounts such as Insurance, Travel, etc.:

Was the Pastor's pension paid last conference year? _____

If so, what amount was paid? _____

Are you a full-time pastor or do you have a supplementary salary? _____

If there is a second job, how many hours are you required to work each week? _____

PERSONAL DEVELOPMENT

Books Read:

Educational Meetings/Seminars:

If enrolled in one of the following, please note and list location: Full Time: _____ Part Time: _____

Continuing Education: _____ Where: _____

College: _____ Where: _____

Seminary: _____ Where: _____

Please note your participation in the following where applicable:

Did you attend the Leadership Training School? _____

Did you attend and participate in the Annual Conference? _____

Did you attend and participate in the Annual CME Convocation? _____

Did you attend the Ministers Retreat? _____

Did you attend the Pastor's Conference? _____ Are you registered? _____

Did you attend and participated in the District Meetings/Conference? _____

Remarks regarding your ministry at the Church:

Submitted:

Pastor In Charge: _____

Presiding Elder: _____

Presiding Bishop: _____

**THE CHRISTIAN METHODIST EPISCOPAL CHURCH
PASTOR'S FOURTH QUARTER REPORT**

DATE: _____ CHURCH: _____

Have you made a spiritual evaluation of each officer to be presented for the new conference year? ____

Have you trained the officers to be presented for the new conference year? Yes: ____ No: ____

When does your church conference meet? _____

When does your official board meet? _____

THE FOLLOWING QUESTIONS WILL BE ASKED DURING THE QUARTER:

Do you have any persons to be licensed as an exhorter or as a local preacher? If so, call the Presiding Elder to schedule testing prior to the quarter and provide a typed list with name, address, and telephone number at the meeting.

What is the slate of your officers for the new conference year? (Attach a typed list of officers including their names, addresses and telephone numbers)

What persons have been voted by the church conference to serve as Annual Conference delegates, to be certified during this quarter? (List names in the space below, attach a typed list including their name, address and telephone number):

List the persons recommended to be presented to the Committee on Ministerial Examination Committee of the Annual Conference? List the names in the space provided below, attach a typed list including their names, addresses, and telephone numbers)

Do you maintain a progress file on your local preachers and preachers on trial? _____

Where are the files located? _____

Do you maintain a file on all baptisms and confirmation of members? _____

Where are the files located? _____

Submitted:

Pastor In Charge: _____

Presiding Elder: _____

Presiding Bishop: _____

**THE CHRISTIAN METHODIST EPISCOPAL CHURCH
 QUARTERLY CONFERENCE REPORT
 THE RECORDING STEWARD REPORT**

DATE: _____ CHURCH: _____

Presiding Elder _____ and members of the _____ Quarterly Conference, it is a privilege to submit this report for the quarter beginning _____ and ending _____

FUNDS RECEIVED

Amount Brought Forward: _____

From Tithes and Offerings: _____	From Benevolent: _____
From Building Fund: _____	From Auxiliaries: _____
From Boards: _____	From Education: _____
From Conf Claims: _____	From Evangelism: _____
From Special Days: _____	Others: _____
From Special Gifts: _____	

Total Received: _____

CHURCH DISBURSEMENTS

Pastor's Salary: _____	Pastor's Travel: _____
Pastor's Insurance: _____	Pastor's 12% _____
Pastor's Education: _____	Pastor's Other: _____
Janitor: _____	Musician: _____
Secretary: _____	Other: _____
Benevolent: _____	Education: _____
Evangelism: _____	Other: _____
Maintenance: _____	Utilities: _____
Equipment Purchases: _____	Church Management: _____
Special Events: _____	Supplies: _____
Non-Clergy Payroll Taxes: _____	Real Estate Taxes: _____

Total Church Disbursements: _____

Are all eligible employees covered by workers compensation if required by the state? _____

Is the church current with all forms and payments? _____

CONFERENCE DISBURSEMENTS

District Asking(s): _____ Annual Conference: _____

PROPERTY TRANSACTIONS

Buildings Purchased:	_____	Buildings Sold:	_____
Land Purchased:	_____	Land Sold:	_____
Vehicles Purchased:	_____	Vehicles Sold:	_____
Totals Purchased:	_____	Totals Sold:	_____

OUTSTANDING MORTGAGES AND LOANS

Mortgage/Loan: _____

Beginning Quarter Balance:	_____	Interest Paid:	_____
Ending Quarter Balance:	_____	Principal Paid:	_____
Mortgage Balance:	_____	Monthly Payments:	_____
Are all accounts current?	_____		

Total Amount Dispersed: _____

Mortgage/Loan: _____

Beginning Quarter Balance:	_____	Interest Paid:	_____
Ending Quarter Balance:	_____	Principal Paid:	_____
Mortgage Balance:	_____	Monthly Payments:	_____
Are all accounts current?	_____		

Total Amount Dispersed: _____

Grand Total Dispersed for All Accounts: _____

BALANCES OF FINANCIAL ACCOUNTS

Type of Account: _____ Current Balance: _____

Type of Account: _____ Current Balance: _____

Type of Account: _____ Current Balance: _____

Are all Church Financial Accounts currents? _____

Submitted,

Recording Steward: _____

Pastor In Charge: _____

Presiding Elder: _____

Presiding Bishop: _____

**THE CHRISTIAN METHODIST EPISCOPAL CHURCH
QUARTERLY CONFERENCE REPORT
TRUSTEE BOARD REPORT**

DATE: _____ CHURCH: _____

Presiding Elder _____ and members of the _____ Quarterly Conference, it is a privilege to submit this report for the quarter beginning _____ and ending _____

MEMBERSHIP ACCOUNTABILITY

Number of Members: _____ Members serving assignments: _____
Meetings Held: _____ Members Attending meetings: _____
Members taking the Christian Index: _____ Members owning a Discipline: _____
Members taking the Missionary Messenger: _____ Members Registered to vote: _____
Number of members attending the Annual CME Convocation: _____
Members involved in social or civic activities: _____

PROJECTS AND ACTIVITIES

Special Projects/ Activities Completed:

Special Projects/ Activities Planned:

STEWARDSHIP

Amount Received from Members: _____ Amount Received from Activities: _____

Total Amount Received: _____

SPIRITUAL GROWTH

Members attending Morning Worship: _____ Members attending Sunday School: _____

Members attending Midweek Services: _____ Members Paying Tithes: _____

PROPERTY RESPONSIBILITY

Value of All Church Property: _____

**THE CHRISTIAN METHODIST EPISCOPAL CHURCH
 QUARTERLY CONFERENCE REPORT
 TRUSTEE BOARD REPORT**

CHURCH:

Is There a Mortgage on the Church: _____ Amount: _____
 Amount Paid on Interest: _____ Principal: _____
 Balance on Mortgage: _____ Monthly Payments: _____

PARSONAGE

Is There a Mortgage on the Parsonage: _____ Amount: _____
 Amount Paid on Interest: _____ Principal: _____
 Balance on Mortgage: _____ Monthly Payments: _____

CHURCH VEHICLE

Number of Church Vehicles: _____
 Is There a Loan on the Church Vehicles: _____ Amount: _____
 Amount Paid on Interest: _____ Principal: _____
 Balance on Loan: _____ Monthly Payments: _____

INSURANCE COVERAGE AND PREMIUMS

Do you have your certificate of Insurance to present at this Quarter: _____
 Is the church enrolled in the CME Church Group Fire and Casualty Insurance Plan? _____

Property Description	Insurance Company	Coverage Amount	Annual Premium	Expiration Date
Church				
Parsonage				
Educational Bldg.				
Vehicles				
Others				

**THE CHRISTIAN METHODIST EPISCOPAL CHURCH
QUARTERLY CONFERENCE REPORT
TRUSTEE BOARD REPORT
RENTAL PROPERTY**

List each property separately: Use additional paper if necessary.

Amount Earned this Quarter: _____ Amount Spent this Quarter: _____

Amount Earned this Quarter: _____ Amount Spent this Quarter: _____

CHURCH PROPERTY

Is the Church in good physical Condition? _____ Parsonage: _____

Vehicle(s): _____

What maintenance projects have been completed on any /or all property:

Has a copy of the Deeds to all church properties been presented to the Presiding Elder? _____

What maintenance projects have been planned:

ACTIVITIES

Are there any legal issues pending? _____ If yes, how are they being addressed:

Are there any Insurance claims? _____ If yes, how are they being addressed:

**THE CHRISTIAN METHODIST EPISCOPAL CHURCH
QUARTERLY CONFERENCE REPORT
TRUSTEE BOARD REPORT**

Has a current copy of Insurance Policies for all church properties been presented to the Presiding Elder? _____

Has a current copy of receipt of payment of insurance on all church properties been presented to the Presiding Elder? _____

Has all property been inventoried? _____

Where are the Deeds kept? _____

Where are the insurance policies kept? _____

Has the Property been exempted from State and Local Taxes? _____

Has the Connectional Trust Clause been inserted on all titles and deeds of real property? _____

What are your goals for this conference year?

Submitted,

Chairperson: _____

Pastor In Charge: _____

Presiding Elder: _____

Presiding Bishop: _____

**THE CHRISTIAN METHODIST EPISCOPAL CHURCH
QUARTERLY CONFERENCE REPORT
THE STEWARD BOARD REPORT**

DATE: _____ CHURCH: _____

Presiding Elder _____ and members of the _____ Quarterly Conference, it is a privilege to submit this report for the quarter beginning _____ and ending _____

MEMBERSHIP ACCOUNTABILITY

Number of Members:	_____
Number of Members Serving Assignments:	_____
Number of Meetings Held:	_____
Number of Members Attending:	_____
Members taking the Christian Index:	_____
Members taking the Missionary Messenger:	_____
Members Owning a Discipline:	_____
Number of Needy Persons Reported to the Pastor:	_____
Number of Sick/Shut-Ins Reported to Pastor:	_____
Number of Visitations:	_____
Number of Stewards Making Visits:	_____
Total Number of Visitations:	_____
Number of members attending the Annual CME Convocation:	_____
Members registered to vote:	_____
Members involved in social or civic activities:	_____

ACTIVITIES

Training Workshops Conducted and Nature of Workshop:

Number of Members Attending: _____

Special Activities Planned/Completed:

Has a copy of the CME Church Sexual Harassment Policy been presented to all church employees:

What are the agreed upon goals that have been set by the Steward Board for this conference year:

STEWARDSHIP

Amount Received from Members: _____

Amount Received from Activities: _____

Total Amount Received: _____

SPIRITUAL GROWTH

Members Attending Morning Worship: _____

Members Attending Sunday school: _____

Members Attending Midweek Services: _____

Members Paying Tithes in the local Church: _____

Members visiting the sick and shut-in and inactive: _____

Do the Stewards meet regularly for prayer: _____

STEWARDSHIP REPORTING

Are the financial records of the church in good order: _____

Are the bills paid to date: _____

Is there a church budget: _____

Has the Steward Board developed a plan for payment of the following assessments? _____

Local Assessments: _____

District Assessments: _____

Annual Conference: _____

SETTING OF THE PASTOR’S SALARY – FIRST QUARTER OR UNTIL COMPLETED

Has the pastors Salary and Expenses been set: _____

Amount Estimated for Salary: _____

Amount Estimated for Pension: _____

Amount Estimated for Housing: _____

Amount Estimated for Travel: _____

Amount Estimated for Insurance: _____

Amount Estimated for Continuing Education: _____

FINANCIAL OTHER MATTERS: SALARIES/TAXES FOR EMPLOYEES

Amount paid if any for Social Security: _____

Amount paid for payroll taxes for non-clergy _____

Submitted,

Chairperson: _____

Pastor In Charge: _____

Presiding Elder: _____

Presiding Bishop: _____

**THE CHRISTIAN METHODIST EPISCOPAL CHURCH
QUARTERLY CONFERENCE REPORT
THE STEWARDESS BOARD REPORT**

DATE: _____ CHURCH: _____

Presiding Elder _____ and members of the _____ Quarterly Conference, it is a privilege to submit this report for the quarter beginning _____ and ending _____

MEMBERSHIP ACCOUNTABILITY

Number of Members:	_____
Number of Members Serving Assignments:	_____
Number of Meetings Held:	_____
Number of Members Attending:	_____
Members taking the Christian Index:	_____
Members taking the Missionary Messenger:	_____
Members Owning a Discipline:	_____
Number of Needy Persons Reported to the Pastor:	_____
Number of Sick/Shut-Ins Reported to Pastor:	_____
Number of Visitations:	_____
Number of Stewards making Visits:	_____
Total Number of Visitations:	_____
Number of members attending the Annual CME Convocation:	_____
Members registered to vote:	_____
Members involved in social or civic activities:	_____

ACTIVITIES

Training Workshops Conducted and Nature of Workshop:

Number of Members Attending: _____

Special Activities Planned/Completed:

What are your goals for this conference year?

STEWARDSHIP

Amount Received from Members: _____
Amount Received from Activities: _____
Total Amount Received: _____

SPIRITUAL GROWTH

Members Attending Morning Worship: _____
Members Attending Sunday School: _____
Members Attending Midweek Services: _____
Members Paying Tithes in the local Church: _____
Members visiting the sick and shut-in and inactive: _____
Do the Stewardess meet regularly for prayer: _____

WORSHIP RESPONSIBILITY

Number of times Communion has been served: _____
How many sick and shut-in served: _____
Total Number of Baptisms: _____
 Infants: _____ Youth: _____ Adults: _____
What Liturgical Color is the Altar: _____
What is the Liturgical season: _____

**SETTING OF THE PASTOR’S SALARY –
FIRST QUARTER OR UNTIL COMPLETED**

Has the pastors Salary and Expenses been set: _____
Amount Estimated for Salary: _____
Amount Estimated for Pension: _____
Amount Estimated for Housing: _____
Amount Estimated for Travel: _____
Amount Estimated for Insurance: _____
Amount Estimated for Continuing Education: _____
Amount for Social Security: _____

Submitted,

President: _____
Pastor In Charge: _____
Presiding Elder: _____
Presiding Bishop: _____

**THE CHRISTIAN METHODIST EPISCOPAL CHURCH
QUARTERLY CONFERENCE REPORT
THE LAY MINISTRY REPORT**

DATE: _____ CHURCH: _____

Presiding Elder _____ and members of the _____ Quarterly Conference, it is a privilege to submit this report for the quarter beginning _____ and ending _____

MEMBERSHIP ACCOUNTABILITY

Number of Members:	_____
Number of Meetings Held:	_____
Number of Members Attending:	_____
Members taking the Christian Index:	_____
Members taking the Missionary Messenger:	_____
Members Owning a Discipline:	_____
Number of members attending the Annual CME Convocation:	_____
Members registered to vote:	_____
Members involved in social or civic activities:	_____

ACTIVITIES

Training Workshops Conducted and Nature of Workshop:

Number of Members Attending: _____

Special Activities Planned/Completed:

Will you observe National Lay Day? _____

What are the plans for that observance?

What are your goals for this conference year?

Number of Members attending the District Lay Meeting/Functions: _____
Number of Members Attending the Annual Conference: _____
Number of Members Attending the Annual CME Convocation: _____

STEWARDSHIP

Amount Received from Members: _____
Amount Received from Activities: _____
Total Amount Received: _____

SPIRITUAL GROWTH

Members Attending Morning Worship: _____
Members Attending Sunday School: _____
Members Attending Midweek Services: _____
Members visiting the sick and shut-in: _____
Members calling on the inactive: _____
Members Paying Tithes in the local Church: _____

Submitted,

President: _____
Pastor In Charge: _____
Presiding Elder: _____
Presiding Bishop: _____

**THE CHRISTIAN METHODIST EPISCOPAL CHURCH
QUARTERLY CONFERENCE REPORT
THE MISSIONARY SOCIETY REPORT**

DATE: _____ CHURCH: _____

Presiding Elder _____ and members of the _____ Quarterly Conference, it is a privilege to submit this report for the quarter beginning _____ and ending _____

MEMBERSHIP ACCOUNTABILITY

Number of Members:	_____
Number of Meetings Held:	_____
Number of Members Attending:	_____
Members taking the Christian Index:	_____
Members Owning a Discipline:	_____
Number of members attending the Annual CME Convocation:	_____
Members registered to vote:	_____
Members involved in social or civic activities:	_____

ACTIVITIES

Training Workshops Conducted and Nature of Workshop:

Number of Members Attending: _____

Special Activities Planned/Completed:

Do you observe special Sundays for Missionary emphasis, describe? _____

Do you have plans for an Annual Missionary Day? Date and Plans? _____

What are your goals for this conference year?

**THE CHRISTIAN METHODIST EPISCOPAL CHURCH
QUARTERLY CONFERENCE REPORT
THE MISSIONARY SOCIETY REPORT**

Number of Members attending the District Lay Meeting/Functions: _____

Number of Members Attending the Annual Conference: _____

Number of Members Attending the Annual CME Convocation: _____

STEWARDSHIP

Amount Received from Members: _____

Amount Received from Activities: _____

Total Amount Received: _____

SPIRITUAL GROWTH

Members Attending Morning Worship: _____

Members Attending Sunday School: _____

Members Attending Midweek Services: _____

Members visiting the sick and shut-in: _____

Members calling on the inactive: _____

Members involved in outreach ministry _____

Do the Missionaries hold prayer meetings: _____

Members Paying Tithes in the local Church: _____

Submitted,

President: _____

Pastor In Charge: _____

Presiding Elder: _____

Presiding Bishop: _____

**THE CHRISTIAN METHODIST EPISCOPAL CHURCH
QUARTERLY CONFERENCE REPORT
BOARD OF CHRISTIAN EDUCATION AND FORMATION REPORT**

DATE: _____ CHURCH: _____

Presiding Elder _____ and members of the _____ Quarterly Conference, it is a privilege to submit this report for the quarter beginning _____ and ending _____

MEMBERSHIP ACCOUNTABILITY

Number of Members:	_____
Number of Meetings Held:	_____
Number of Members Attending:	_____
Number of Members Attending District Meeting/Functions:	_____
Number of Members Attending the Annual Conference:	_____
Number of members attending the Annual CME Convocation:	_____
Members Owning a Discipline:	_____
Members registered to vote:	_____
Members involved in social or civic activities:	_____

ACTIVITIES

Training Workshops Conducted and Nature of Workshop:

Number of Members Attending:	_____
New Member Class:	_____
How Many Classes?	_____
Total Attending:	_____

Special Activities Planned/Completed:

What are your goals for this conference year?

Do you have a special observance for Black History Month? _____

Do you have a special observance for the Founding of the CME Church? _____

Do you have a special observance for Children's Day? _____

Do you have a special observance for CYF Day? _____

Do you have a special observance for Graduate Recognition Day? _____

Do you conduct Vacation Bible School? _____

 How Many Students in VBS? _____

 Teacher and Workers? _____

STEWARDSHIP

Amount Received from Members: _____

Amount Received from Activities: _____

Total Amount Received: _____

SPIRITUAL GROWTH

Members Attending Morning Worship: _____

Members Attending Sunday School: _____

Members Attending Midweek Services: _____

Do you have prayer with your Board: _____

Members Paying Tithes in the local Church: _____

Submitted,

President: _____

Pastor In Charge: _____

Presiding Elder: _____

Presiding Bishop: _____

**THE CHRISTIAN METHODIST EPISCOPAL CHURCH
QUARTERLY CONFERENCE REPORT
THE YOUNG ADULT REPORT**

DATE: _____ CHURCH: _____

Presiding Elder _____ and members of the _____ Quarterly Conference, it is a privilege to submit this report for the quarter beginning _____ and ending _____

MEMBERSHIP ACCOUNTABILITY

Number of Members:	_____
Number of Meetings Held:	_____
Number of Members Attending:	_____
Members taking the Christian Index:	_____
Members taking the Missionary Messenger:	_____
Members Owning a Discipline:	_____
Members registered to vote:	_____
Members involved in social or civic activities:	_____

How do you increase and maintain attendance, describe?

What is your meeting schedule (dates)?

Members Attending General Conference:	_____
Members Attending Connectional Youth/Young Adult Conference:	_____
Members Attending Annual Conference:	_____
Members Attending Leadership Training School and Conference:	_____

ACTIVITIES

Training Workshops Conducted and Nature of Workshop:

Number of Members Attending: _____

Special Activities Planned/Completed:

What are your goals for this conference year?

STEWARDSHIP

Amount Received from Members: _____
Amount Received from Activities: _____
Total Amount Received: _____
Amount Dispersed for expenses: _____
Total Amount Available: _____

SPIRITUAL GROWTH

Members Attending Morning Worship: _____
Members Attending Sunday School: _____
Members Attending Midweek Services: _____
Members Calling on the Inactive: _____
Do you have regular prayer times? _____
Members Paying Tithes in the local Church: _____

Submitted,

President: _____
Pastor In Charge: _____
Presiding Elder: _____
Presiding Bishop: _____

**THE CHRISTIAN METHODIST EPISCOPAL CHURCH
QUARTERLY CONFERENCE REPORT
THE CHRISTIAN YOUTH FELLOWSHIP REPORT**

DATE: _____ CHURCH: _____

Presiding Elder _____ and members of the _____ Quarterly Conference, it is a privilege to submit this report for the quarter beginning _____ and ending _____

MEMBERSHIP ACCOUNTABILITY

Number of Members: _____

Number of Meetings Held: _____

Number of Members Attending: _____

Number of Officers: _____

Number of Directors: _____

Number of Members Attending District Meetings/Functions: _____

Number of Members Attending the General Conference: _____

When do you have your meetings? _____

What is the makeup of your meetings? _____

What materials do you use? _____

Do you use CME Literature and Catechism? _____

Number of members attending the Annual CME Convocation: _____

Members involved in social or civic activities: _____

ACTIVITIES

Training Workshops Conducted and Nature of Workshop:

Number of Members Attending: _____

Special Activities Planned/Completed:

Do you have the following Commissions?

Faith and Growth: _____ Chairperson: _____
Outreach and Witness: _____ Chairperson: _____
Stewardship/Fellowship: _____ Chairperson: _____

STEWARDSHIP

Amount Received from Members: _____
Amount Received from Activities: _____
Total Amount Received: _____
Amount Dispersed for expenses: _____
Total Amount Available: _____

SPIRITUAL GROWTH

Members Attending Morning Worship: _____
Members Attending Sunday School: _____
Members Attending Midweek Services: _____
Members Paying Tithes in the local Church: _____

Submitted,

President: _____
Pastor In Charge: _____
Presiding Elder: _____
Presiding Bishop: _____

**THE CHRISTIAN METHODIST EPISCOPAL CHURCH
QUARTERLY CONFERENCE REPORT
THE SUNDAY SCHOOL REPORT**

DATE: _____ CHURCH: _____

Presiding Elder _____ and members of the _____ Quarterly Conference, it is a privilege to submit this report for the quarter beginning _____ and ending _____

ACTIVITIES

Training Workshops Conducted and Nature of Workshop:

Number of Members Attending: _____

Special Activities Planned/Completed:

Do you observe special Sundays? Describe:

Do you have a yearly promotion or recognition of students? Describe:

Members registered to vote: _____

Members involved in social or civic activities: _____

How do you increase and maintain attendance? Describe: _____

Do the teachers and officers attend the District Leadership Training Schools? _____

Do the teachers and officers attend the District Meetings? _____

Do the teachers and officers attend the Annual Conference? _____

Do the teachers and officers attend the Annual CME Convocation? _____

What are your goals for this conference year?

SUNDAY SCHOOL STATISTICS

How many classes? _____

How many teachers? _____

How many officers? _____

Average Attendance: _____

What Literature do you use? _____

How much time is devoted to the study of the lesson each Sunday: _____

STEWARDSHIP

Amount Received from Sunday School Offerings: _____

Amount Received from Activities: _____

Total Amount Received: _____

Total Amount Spent for Literature/Supplies: _____

Total Amount Available: _____

SPIRITUAL GROWTH

Teachers/Officers Attending Morning Worship: _____

Teachers/Officers Attending Midweek Services: _____

Teachers/Officers Paying Tithes in the local Church: _____

Teachers/Officers calling on the absentees: _____

Do you have prayer times with teachers/officers? _____

Submitted,

Sunday School Superintendent: _____

Pastor In Charge: _____

Presiding Elder: _____

Presiding Bishop: _____

**THE CHRISTIAN METHODIST EPISCOPAL CHURCH
QUARTERLY CONFERENCE REPORT
THE _____ CHOIR REPORT**

DATE: _____ CHURCH: _____

Presiding Elder _____ and members of the _____ Quarterly Conference, it is a privilege to submit this report for the quarter beginning _____ and ending _____

MEMBERSHIP ACCOUNTABILITY

Number of Members: _____

Number of Meetings Held: _____

Members taking the Christian Index: _____

Members taking the Missionary Messenger: _____

Members Owning a Discipline: _____

How many attend meetings and practice? _____

When are your meetings and practice? _____

How much time is allowed for devotion during rehearsal? _____

How many are present when the choir sings? _____

How many new songs have you learned? _____

What type of songs do you sing primarily during worship?

What type of instruments do you use to accompany your singing?

How many singing engagements have you accepted? _____

How do you increase and maintain attendance, please describe?

Members registered to vote: _____

Members involved in social or civic activities: _____

Number of Members Attending District Meetings: _____

Number of Members Attending the Annual Conference: _____

Number of Members Attending the General Conference: _____

Number of Members Attending the Leadership Training School and Conference: _____

ACTIVITIES

Training Workshops Conducted and Nature of Workshop:

Number of Members Attending: _____

Special Activities Planned/Completed:

What are your goals for this conference year?

STEWARDSHIP

Amount Received from Members: _____

Amount Received from Activities: _____

Total Amount Received: _____

Amount Spent for expenses: _____

Total Amount Available: _____

SPIRITUAL GROWTH

Members Attending Morning Worship: _____

Members Attending Sunday School: _____

Members Attending Midweek Services: _____

Members Calling on the Inactive: _____

Do you have regular prayer times? _____

Members Paying Tithes in the local Church: _____

Submitted,

President: _____

Pastor In Charge: _____

Presiding Elder: _____

Presiding Bishop: _____

**THE CHRISTIAN METHODIST EPISCOPAL CHURCH
QUARTERLY CONFERENCE REPORT
THE USHER BOARD REPORT**

DATE: _____ CHURCH: _____

Presiding Elder _____ and members of the _____ Quarterly Conference, it is a privilege to submit this report for the quarter beginning _____ and ending _____

MEMBERSHIP ACCOUNTABILITY

Number of Members:	_____
Number of Meetings Held:	_____
Members taking the Christian Index:	_____
Members taking the Missionary Messenger:	_____
Members Owning a Discipline:	_____
Number of Members Attending District Meetings/Functions:	_____
Number of Members Attending the Annual Conference:	_____
Number of members Attending the Annual CME Convocation:	_____
Do you work by Signs?	_____
Do you train new ushers?	_____
Are they faithful to their assignment?	_____
Do all the ushers pray before going on duty?	_____
Members registered to vote:	_____
Members involved in social or civic activities:	_____

ACTIVITIES

Training Workshops Conducted and Nature of Workshop:

Number of Members Attending: _____

Special Activities Planned/Completed:

What are your goals for this conference year?

STEWARDSHIP

Amount Received from Members: _____

Amount Received from Activities: _____

Total Amount Received: _____

SPIRITUAL GROWTH

Members Attending Morning Worship: _____

Members Attending Sunday School: _____

Members Attending Midweek Services: _____

Members Visiting the Sick and Shut In: _____

Members calling on the inactive: _____

Members Paying Tithes in the local Church: _____

Submitted,

President: _____

Pastor In Charge: _____

Presiding Elder: _____

Presiding Bishop: _____

**THE CHRISTIAN METHODIST EPISCOPAL CHURCH
QUARTERLY CONFERENCE REPORT
THE _____ AUXILIARY REPORT**

DATE: _____ CHURCH: _____

Presiding Elder _____ and members of the _____ Quarterly Conference, it is a privilege to submit this report for the quarter beginning _____ and ending _____

MEMBERSHIP ACCOUNTABILITY

Number of Members:	_____
Number of Meetings Held:	_____
Members taking the Christian Index:	_____
Members taking the Missionary Messenger:	_____
Members Owning a Discipline:	_____
Number of Members Attending District Meetings/Functions:	_____
Number of Members Attending the Annual Conference:	_____
Number of members Attending the Annual CME Convocation:	_____
Members registered to vote:	_____
Members involved in social or civic activities:	_____

ACTIVITIES

Training Workshops Conducted and Nature of Workshop:

Number of Members Attending: _____

Special Activities Planned/Completed:

Describe the nature and purpose of your auxiliary:

Do you have plans for an annual day, list date and plans?

What are your goals for this conference year?

STEWARDSHIP

Amount Received from Members: _____
Amount Received from Activities: _____
Total Amount Received: _____
Amount Dispersed for expenses: _____
Total Amount Available: _____

SPIRITUAL GROWTH

Members Attending Morning Worship: _____
Members Attending Sunday School: _____
Members Attending Midweek Services: _____
Members Visiting the Sick and Shut In: _____
Members calling on the inactive: _____
Members Paying Tithes in the local Church: _____

Submitted,

President: _____
Pastor In Charge: _____
Presiding Elder: _____
Presiding Bishop: _____

**THE CHRISTIAN METHODIST EPISCOPAL CHURCH
QUARTERLY CONFERENCE REPORT
THE COMMISSION ON MEMBERSHIP AND EVANGELISM REPORT**

DATE: _____ CHURCH: _____

Presiding Elder _____ and members of the _____ Quarterly Conference, it is a privilege to submit this report for the quarter beginning _____ and ending _____

MEMBERSHIP ACCOUNTABILITY

Number of Members:	_____
Number of Meetings Held:	_____
Number of Members Attending:	_____
Members taking the Christian Index:	_____
Members Owning a Discipline:	_____
Number of Members Attending District Meetings/Functions:	_____
Number of Members Attending the Annual Conference:	_____
Number of members Attending the Annual CME Convocation:	_____
Members registered to vote:	_____
Members involved in social or civic activities:	_____

ACTIVITIES

Training Workshops Conducted and Nature of Workshop:

Number of Members Attending: _____

Special Activities Planned/Completed:

EVANGELISM

Is the Church planning a or any Revival(s) this year? _____ If so, when and who will be the evangelist(s)? _____

Witness and Visitation, describe:

DISCIPLESHIP

What is the Church planning to encourage and support the membership? Describe:

Are there any efforts to reach the inactive? Describe:

What are your goals for this conference year?

STEWARDSHIP

Amount Received Services:	_____
Amount Dispersed for Services:	_____
Total Amount Available:	_____

SPIRITUAL GROWTH

Members Attending Morning Worship:	_____
Members Attending Sunday School:	_____
Members Attending Midweek Services:	_____
Members Visiting the Sick and Shut In:	_____
Members calling on the inactive:	_____
Members planning to attend District Board of Evangelism workshop:	_____
Members Paying Tithes in the local Church:	_____

Submitted,

President:	_____
Pastor In Charge:	_____
Presiding Elder:	_____
Presiding Bishop:	_____

**THE CHRISTIAN METHODIST EPISCOPAL CHURCH
QUARTERLY CONFERENCE REPORT
EXHORTER/LOCAL PREACHER/LOCAL DEACON-ELDER REPORT**

DATE: _____ CHURCH: _____

Presiding Elder _____ and members of the _____ Quarterly Conference, it is a privilege to submit this report for the quarter beginning _____ and ending _____

PERSONAL ACCOUNTABILITY

Do you own a Discipline? _____
Do you subscribe to the Christian Index? _____
Do you have daily private devotion? _____
Do you pay Tithes in Church? _____
Do you own a C.M.E. book of ritual? _____
Are you registered to vote? _____

CHURCH ATTENDANCE

Do you attend the following?

Morning Worship:	_____	Church Conference:	_____
Sunday School:	_____	Bible/Prayer Meeting:	_____
Official Board:	_____	Annual Conference:	_____
District Conference:	_____	District Meetings:	_____
Ministers Training (Local):	_____	Ministers Training (District):	_____

If no, state the reasons and if your pastor excused you:

PASTORAL MINISTRY

Visits to the Jail/Prison:	_____	Visits to Nursing Homes:	_____
Visits to Sick/Shut-In:	_____	Visits to Hospitals:	_____
Visits to the Inactive:	_____	Visits to Unchurched:	_____
Visits to assist with communion:	_____	Opportunities to preach/teach:	_____

PERSONAL DEVELOPMENT

Books Read:

Educational Meetings/Seminars:

If enrolled in one of the following, please note and list location:

Continuing Education: _____ Where: _____

College: _____ Where: _____

Seminary: _____ Where: _____

Do you plan to attend the Annual CME Convocation? _____

Are you registered? _____

Remarks regarding your ministry:

How are you involved in social or civic activities?

What are your goals for this conference year?

Submitted,

Exhorter/Local Preacher/Local Deacon/Elder: _____

Pastor In Charge: _____

Presiding Elder: _____

Presiding Bishop: _____

PLEASE NOTE: *This report is not the legal business of the Quarterly Conference, it is a part of the Presiding Elders' responsibility to keep up with and direct local preachers, etc., but should not be considered by the Quarter since they can take no action regarding this report.*