Charge Conference Reporting Form

For *Preaching Stations*

Holston Conference, United Methodist Church

District: _____ Charge: _____

Charge Conference year: _____ Pastor's Name In Charge: _____

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1. Describe the ministry of the Preaching Station in the last 12 months, including efforts relating to the Vital Congregations/Vital Signs, VBS, Sunday School Classes, Bible Studies, etc.

2. Number of times this year the preaching station had services without the pastor in charge present (lay servants, etc.)

3. Please **attach** the membership roll and either the average attendance of worship services since January or a printed copy of the Vital Signs Report from the website.

4. Please **attach** a certificate of liability insurance. Is the Preaching Station property insured?_____ Has the insurance coverage been reviewed in the past 12 months?_____ Date of Review:_____

   Name and address of insurance carrier_____

   _____

5. What is the value of the church property?_____

6. Please name at least 2 Trustees and include their addresses:

   1. Name_____

      Address_____

   2. Name_____

      Address_____