



CHANGE IN CHURCH STATUS

District _____

Name of Church _____ Acct. # _____

Location of Church _____

Mailing Address for Church _____

CHANGE:

The name of the church has been changed to:

The mailing address of this church has been changed to:

This church has a new pastor:

Former Pastor _____ Acct. # _____

New Pastor _____ Acct. # _____

Address _____

This church was closed _____

Date

This church withdrew _____

Date

This church was dropped _____

Date

REASON:

Signed by Bishop or Secretary (strike out one)

Date

For General Secretary's Office only:

Date action implemented _____ Church Acct. # _____

By _____