



QUARTERLY CONFERENCE REPORT
Auxiliary Organization

Church: _____

Name of Auxiliary: _____

Quarter beginning: _____ and ending: _____

Is this a new organization? Yes No If yes, when was it organized? _____

Membership Accountability

Number of members _____ Number of meetings held _____

Number owning a copy of the latest C.M.E. Discipline _____

Describe the purpose and nature of your auxiliary? _____

What are your organization's goal and objectives for ministry? _____

How will your organization enhance the Ministry of the church and bring people into the presence of God? _____

Have your ministry goals been shared with the pastor and membership? Yes No

What special activities have you planned for this conference year? _____

Do you plan to have a special day? Yes No If yes, give date and share your program plans.

President

Pastor

Please duplicate and prepare one copy for each auxiliary and one for the Elder, Pastor and Secretary