

**THE CHRISTIAN METHODIST EPISCOPAL DISTRICT
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 _____.

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? _____

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: _____
