

Department for Outreach Report *(Quarterly Report)*

for

at

_____ *Congregation/Mission*

_____ *City/Town*

<u># of</u> <u>Bap. Mem.</u>	<u># of</u> <u>Comm. Mem.</u>	<u># of Sun.</u> <u>Services</u>	<u>Avg. Att.</u>	<u># of Other</u> <u>Services</u>	<u>Avg. Att.</u>	<u>Total</u> <u>Comm.</u>
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Official Acts

Baptisms – _____ Weddings – _____ Funerals – _____ Confirmation – _____(Y); _____(A)

Pastoral Activities

Calls on Members (not shut-ins) – _____ Calls on Members (shut-ins) – _____

Calls on Members (in hospital) – _____ Visits with Non-members – _____

Catechesis Avg. Att. – _____ Bible Class Avg. Att. – _____

Other – _____

Challenges:

Blessings:

Submitted by: _____ Date: _____