

Church/Charge Conference Recording Secretary's Minutes Form

DUE at the close of Church/Charge Conference

Church/Charge:.....Date: .....

Pastor:..... Recording Secretary:.....

Number in Attendance: ..... Please attach the sign-in sheet(s) to this form.

Annual Church/Charge Conference Business Items:

1. Pastoral Compensation for 2021 Please attach a copy of the signed compensation & ARP forms.

- Gross Salary approved: \$.....
Housing Exclusion Resolution: If adopted, please attach a copy of the resolution.
Amount approved: \$.....
Accountable Reimbursement Plan \$.....
Total Compensation package: \$.....

2. Lay Leadership / Elections

a. Trustees Please attach ballots used.

Please list names and class years of those newly elected:

Table with 2 columns: Name, Class. Multiple rows of dotted lines for entry.

b. Lay Leadership Team (formerly Nominations & Personnel)

Please list names and class years of those newly elected:

Table with 2 columns: Name, Class. Multiple rows of dotted lines for entry.

c. Election of Lay Leadership

Please attach a complete/corrected listing of those elected.

- Approved Not Approved

3. Candidates for Ministry

Please list names and designate "Initial Approval" or "Subsequent Approval"

Note that an additional form will be required by the District Committee on Ordained Ministry.

Table with 3 columns: Name, Initial approval, Subsequent Approval. Includes checkboxes for approval status.

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**4. Certified Lay Ministers**

Please list names and designate "Newly Approved" or "Recertified"

| Name  | Newly Approved           | Recertified              |
|-------|--------------------------|--------------------------|
| ..... | <input type="checkbox"/> | <input type="checkbox"/> |
| ..... | <input type="checkbox"/> | <input type="checkbox"/> |
| ..... | <input type="checkbox"/> | <input type="checkbox"/> |
| ..... | <input type="checkbox"/> | <input type="checkbox"/> |
| ..... | <input type="checkbox"/> | <input type="checkbox"/> |
| ..... | <input type="checkbox"/> | <input type="checkbox"/> |

**5. Recommendation of Lay Servants** *Please attach copies of signed report forms.*

List Name, followed by designation:

| Name  | Certified Lay<br>Servant | Certified Lay<br>Speaker |
|-------|--------------------------|--------------------------|
| ..... | <input type="checkbox"/> | <input type="checkbox"/> |
| ..... | <input type="checkbox"/> | <input type="checkbox"/> |
| ..... | <input type="checkbox"/> | <input type="checkbox"/> |
| ..... | <input type="checkbox"/> | <input type="checkbox"/> |
| ..... | <input type="checkbox"/> | <input type="checkbox"/> |
| ..... | <input type="checkbox"/> | <input type="checkbox"/> |

**Other Business Items** *(as applicable):*

**1. Acceptance of Bequest or Other Gifts** *Please attach copy of resolution.*

Name of Donor: ..... Amount: \$.....  
 Specified Use of Bequest:.....

Approved       Not Approved

**2. Removal of Members from the Rolls**

| Name  | Year of Notification |        |       | Church | Removed                  | Not Removed              |
|-------|----------------------|--------|-------|--------|--------------------------|--------------------------|
|       | First                | Second | Third |        |                          |                          |
| ..... | .....                | .....  | ..... | .....  | <input type="checkbox"/> | <input type="checkbox"/> |
| ..... | .....                | .....  | ..... | .....  | <input type="checkbox"/> | <input type="checkbox"/> |
| ..... | .....                | .....  | ..... | .....  | <input type="checkbox"/> | <input type="checkbox"/> |
| ..... | .....                | .....  | ..... | .....  | <input type="checkbox"/> | <input type="checkbox"/> |
| ..... | .....                | .....  | ..... | .....  | <input type="checkbox"/> | <input type="checkbox"/> |

**3. Other Business Items:**

.....  
 .....

**Other Items for Approval:**

- 1. Last Year's Audit:  Approved       Not Approved
- 2. Minutes of last year's Church/Charge Conference:  Approved       Not Approved

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Reports Received (as applicable)

Please attach a copy.

1. From Clergy

List names:

.....

2. From Laity

List names:

.....

3. College Students

Name

Address

.....

4. S/PPRC

Submitted

Not Submitted

5. Parsonage Inspection & Committee Report

6. VIM & Outreach Reports

7. Safe Sanctuary Compliance

8. Accessibility Audit

Other Business:

.....

Signatures: Secretary: .....

Pastor: .....

Presider: .....

Superintendent: .....