2019-20 FCNC Report

Meetin	g Name:
	Meeting address:
	Meeting phone:
Clerk of Monthly Meeting:	
	Phone:
	Email address:
Clerk of Ministry & Counsel:	
	Phone:
	Email address:
Treasurer:	
	Phone:
	Email address:
Pastor:	
	Phone:
	Email address:
Number of Members (0n 6/1/ 2019):	
Associate Members: (on 6/1/2019):	
Total # of members (associate +adult)	
Average number of persons at Sunday Worship Service:	
(Please use period from 7 th month 2018 through 6 th month 2019 to determine average)	

Please return this form to Roger Greene prior to July 1, 2019. Thank you.

For electronic return send to m75rlg@embarqmail.com (Preferred method of return.)

For regular mail send to:

FCNC

c/o Roger Greene

1295 Greene Oak Road

Asheboro, NC 27205