

GULF STATES CONFERENCE
Ministers' Report of Additions by Baptism, Profession of Faith, and Re-Baptisms

For the Month of _____

Print or Type. Do not Write.

No.	Mr., Mrs., or Miss with Full Name	Complete Address and Phone Number	Date of Birth	Date of Baptism	Date of POF	Date of Re-Baptism	Church Joined	*Name of Head of Household and Marital Status
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								

Total Names Reported Above ____ Date Report Sent ____ District Pastor: _____ Evangelist: _____

This report must be completed by the minister reporting those baptized, received by profession of faith, or rebaptized. This needs to be mailed back to the GSC clerk Sherry Fancher: sfancher@gscsda.org. Remember this is a fillable form you need to save it to your computer and fill it out and do a save as a different name before sending it, otherwise it will come through blank *If there is a relative in the same household who is already a member of the same church, please use their name.