

THE EPISCOPAL DIOCESE OF CENTRAL PENNSYLVANIA

Church Officers and Vestry Members

Church Name: _____	Community: _____
Annual Meeting Date: _____	Today's Date: _____

Position: _____ **Name and Address (include zip code)** _____

Senior Warden Mr. Mrs. Ms. Other NAME: _____

Address _____

City _____ State _____ Zip Code _____

Phone # _____ Cell _____ Work _____ E-Mail _____

Junior Warden Mr. Mrs. Ms. Other NAME: _____

Address _____

City _____ State _____ Zip Code _____

Phone # _____ Cell _____ Work _____ E-Mail _____

Secretary Mr. Mrs. Ms. Other NAME: _____

Address _____

City _____ State _____ Zip Code _____

Phone # _____ Cell _____ Work _____ E-Mail _____

Treasurer Mr. Mrs. Ms. Other NAME: _____

Address _____

City _____ State _____ Zip Code _____

Phone # _____ Cell _____ Work _____ E-Mail _____

ECW Chair Mr. Mrs. Ms. Other NAME: _____

Address _____

City _____ State _____ Zip Code _____

Phone # _____ Cell _____ Work _____ E-Mail _____

Christian Ed. Mr. Mrs. Ms. Other NAME: _____

Address _____

City _____ State _____ Zip Code _____

Phone # _____ Cell _____ Work _____ E-Mail _____

Youth Chair Mr. Mrs. Ms. Other NAME: _____

Address _____

City _____ State _____ Zip Code _____

Phone # _____ Cell _____ Work _____ E-Mail _____

Planned Giving Mr. Mrs. Ms. Other NAME: _____

Address _____

City _____ State _____ Zip Code _____

Phone # _____ Cell _____ Work _____ E-Mail _____

VESTRY MEMBERS

Name and Address (include zip code)

Mr. Mrs. Ms. Other NAME: _____
Address _____
City _____ State _____ Zip Code _____
Phone # _____ Cell _____ Work _____ E-Mail _____

Mr. Mrs. Ms. Other NAME: _____
Address _____
City _____ State _____ Zip Code _____
Phone # _____ Cell _____ Work _____ E-Mail _____

Mr. Mrs. Ms. Other NAME: _____
Address _____
City _____ State _____ Zip Code _____
Phone # _____ Cell _____ Work _____ E-Mail _____

Mr. Mrs. Ms. Other NAME: _____
Address _____
City _____ State _____ Zip Code _____
Phone # _____ Cell _____ Work _____ E-Mail _____

Mr. Mrs. Ms. Other NAME: _____
Address _____
City _____ State _____ Zip Code _____
Phone # _____ Cell _____ Work _____ E-Mail _____

Mr. Mrs. Ms. Other NAME: _____
Address _____
City _____ State _____ Zip Code _____
Phone # _____ Cell _____ Work _____ E-Mail _____

Mr. Mrs. Ms. Other NAME: _____
Address _____
City _____ State _____ Zip Code _____
Phone # _____ Cell _____ Work _____ E-Mail _____

Mr. Mrs. Ms. Other NAME: _____
Address _____
City _____ State _____ Zip Code _____
Phone # _____ Cell _____ Work _____ E-Mail _____

Mr. Mrs. Ms. Other NAME: _____
Address _____
City _____ State _____ Zip Code _____
Phone # _____ Cell _____ Work _____ E-Mail _____

Return this form to PO Box 11937, Harrisburg, PA 17108

The Diocese requests permission to use vestry member email address for distribution of the Diocesan Digest.
Vestry members have the option of unsubscribing to the Digest upon receipt.

Total Active Baptized Members reported on line M12 of 2013 Parochial Report _____
Number of Delegates _____

FORM FOR CERTIFICATION OF LAY DELEGATES TO CONVENTION

It is hereby certified that a meeting of the Vestry of _____ Church, _____, was held on the _____ day of _____, 20____. The following were duly elected Delegates and Alternate Delegates to the 144th Annual Convention of the Episcopal Church in the Diocese of Central Pennsylvania, to be held in State College, PA on June 13 & 14, 2014 and said Delegates are worshipers in said Church now and have also been for not less than six calendar months before election.

DELEGATES (Name, address, email & telephone)	ALTERNATES(Name, address, email & telephone)
1. Name: _____	1. Name: _____
Address: _____	Address: _____
Email: _____	Email: _____
Tel: _____	Tel: _____
2. Name: _____	2. Name: _____
Address: _____	Address: _____
Email: _____	Email: _____
Tel: _____	Tel: _____
3. Name: _____	3. Name: _____
Address: _____	Address: _____
Email: _____	Email: _____
Tel: _____	Tel: _____
4. Name: _____	4. Name: _____
Address: _____	Address: _____
Email: _____	Email: _____
Tel: _____	Tel: _____
5. Name: _____	5. Name: _____
Address: _____	Address: _____
Email: _____	Email: _____
Tel: _____	Tel: _____
6. Name: _____	6. Name: _____
Address: _____	Address: _____
Email: _____	Email: _____
Tel: _____	Tel: _____
7. Name: _____	7. Name: _____
Address: _____	Address: _____
Email: _____	Email: _____
Tel: _____	Tel: _____

Dated this _____ day of _____, 20____

Rector _____ Secretary of the Vestry _____

Note: Please return one copy of this form NOT LATER THAN April 15, 2014 to:
Diocesan Convention co/ Linda Arguedas – (larguedas@diocesecpa.org)
PO Box 11937
Harrisburg, PA 17108-1937