

2009 Congregation Officers

NEPS # _____

CONGREGATION _____ ELCA # _____

LOCATION ADDRESS _____ COUNTY _____

_____ E-MAIL ADDRESS _____

PASTOR _____ CHURCH OFFICE PHONE _____

PARSONAGE YES NO PARSONAGE ADDRESS _____

Council President

Name _____

Address _____

Phone (_____) _____ E-Mail Address _____

Council Vice President

Name _____

Address _____

Phone (_____) _____ E-Mail Address _____

Council Secretary

Name _____

Address _____

Phone (_____) _____ E-Mail Address _____

Council Treasurer

Name _____

Address _____

Phone (_____) _____ E-Mail Address _____

Council Financial Secretary

Name _____

Address _____

Phone (_____) _____ E-Mail Address _____

Please indicate who should receive benevolence letters/statements. The pastor's copy of the benevolence letters/statements will be included. If no other person is designated, the Council Treasurer will receive these mailings.

Please return this form to Sandy Eck at the Northeastern Pennsylvania Synod office (4865 Hamilton Blvd., Wescosville, PA 18106) by April 15, 2009.